2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

DOCUMENT# P03000149307

Entity Name: BLUE BAND, INC.

Current Principal Place of Business:

550 BILTMORE WAY
200
CORAL GABLES, FL 33146

New Principal Place of Business:

550 BILTMORE WAY
200
CORAL GABLES, FL 33134 US

Current Mailing Address:

PO BOX 557243
MIAMI, FL 33255

New Mailing Address:

PO BOX 557243
MIAMI, FL 33255 US

FEI Number: 51-0493644 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CMS INTERNATIONAL ENTERPRISES, INC.
550 BILTMORE WAY, SUITE 200
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete
Name: KAHAN, KEITH
Address: PO BOX 557243
City-St-Zip: CORAL GABLES, FL 33255

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition
Name: KAHAN, KEITH
Address: PO BOX 557243
City-St-Zip: CORAL GABLES, FL 33255 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEITH KAHAN PTSD 04/27/2009

Electronic Signature of Signing Officer or Director Date