2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000155909

City-St-Zip:

FILED Apr 20, 2009 Secretary of State

Entity Nan	ne: SSBP CC	ORP.					
Current Principal Place of Business:				New Principal Place of Business:			
4650 DONALD ROSS ROAD SUITE 200							
PALM BEA	CH GARDEN	S, FL 33418	US				
Current Mailing Address:					New Mailing Address:		
%CENTRECORP MANAGEMENT SERVICES 2851 JOHN STREET, SUITE 1 MARKHAM, ONTARIO, CANADA, L3R 5R7				2851 JOHN STREET SUITE 1 MARKHAM ONTARIO, ON L3R 5R7			
FEI Number:	20-0513500	FEI Number A	pplied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()
Name and	Address of C	Current Regist	tered Agent:		Name and	Address o	f New Registered Agent:
	/ICES, INC. CUTIVE PARK FL 33331	DR., SUITE 4 US					
The above in the State		submits this st	atement for the pu	urpose o	f changing it	s registere	d office or registered agent, or both,
SIGNATUR	RE:						
	Electror	nic Signature o	f Registered Age	nt			Date
Election Carr	npaign Financin	g Trust Fund Co	ntribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PRESTON, STE 4650 DONALD) Delete EPHEN S.B. ROSS ROAD ST GARDENS, FL 33			Title: Name: Address: City-St-Zip:		(X) Change () Addition STEPHEN S.B. BELL ROSS ROAD SUITE 140 (75248 US
Title: Name: Address: City-St-Zip:	()) Delete			Title: Name: Address: City-St-Zip:		()Change(X)Addition JOHN W.S. LD ROSS ROAD SUITE 200 CH GARDENS, FL 33418
Title: Name: Address:) Delete			Title: Name: Address:	DV GREEN, RO 2851 JOHN	()Change(X)Addition BERT S STREET SUITE 1

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.

City-St-Zip:

MARKHAM ONTARIO, ON L3R 5R7

SIGNATURE: ROBERT S GREEN V 04/20/2009