

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000043300

Entity Name: KLARIFI INCORPORATED

FILED
Apr 25, 2009
Secretary of State

Current Principal Place of Business:

214 15 AVE NORTH
ST PETERSBURG, FL 337044414

New Principal Place of Business:

214 15 AVE NORTH
ST PETERSBURG, FL 337044414 US

Current Mailing Address:

214 15 AVE NORTH
ST PETERSBURG, FL 337044414

New Mailing Address:

214 15 AVE NORTH
ST PETERSBURG, FL 337044414 US

FEI Number: 20-0980414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, KARYL
214 15 AVE NORTH
ST PETERSBURG, FL 337044414 US

Name and Address of New Registered Agent:

WHITE, KARYL M RN
214 15 AVE NORTH
ST PETERSBURG, FL 337044414 US

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: KARYL M WHITE

04/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHITE, KARYL M
Address: 214 15TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WHITE, KARYL M
Address: 214 15TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33704

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: KARYL M WHITE

PRES

04/25/2009

Electronic Signature of Signing Officer or Director

Date