2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# P04000091633

Entity Name: P.B. EQUINE PRODUCTS, INC.

Current Principal Place of Business:

205 WORTH AVENUE
303
PALM BEACH, FL 33480 US

New Principal Place of Business:

205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480 US

Current Mailing Address:

205 WORTH AVENUE
303
PALM BEACH, FL 33480 US

New Mailing Address:

205 WORTH AVENUE
SUITE 303
PALM BEACH, FL 33480 US

FEI Number: 20-1252288 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRIAN, PHILIPPE J
205 WORTH AVENUE
303
PALM BEACH, FL 33480 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: DVP ( ) Delete
Name: BENOIT, PHILIPPE
Address: 205 WORTH AVENUE SUITE 300
City-St-Zip: WELLINGTON, FL 33414 US

Title: DPT ( ) Delete
Name: PRUDENT, HENRI
Address: 805 WEST WASHINGTON STREET
City-St-Zip: MIDDELBURG, VA 20118 US

Title: S ( ) Delete
Name: BRIAN, PHILIPPE J
Address: 205 WORTH AVENUE SUITE 303
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: BENOIT, PHILIPPE
Address: 205 WORTH AVENUE SUITE 300
City-St-Zip: PALM BEACH, FL 33480 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: PHILIPPE J. BRIAN S 04/24/2009

Electronic Signature of Signing Officer or Director Date