

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000101730

FILED
May 02, 2008
Secretary of State

Entity Name: PERICLES INTERNATIONAL ENTERPRISES, INC.

Current Principal Place of Business:

201 NW 7TH STREET
UNIT 105
MIAMI, FL 33136

New Principal Place of Business:

11755 SW 18TH STREET
UNIT 409
MIAMI, FL 33175

Current Mailing Address:

PO BOX 351448
MIAMI, FL 33135

New Mailing Address:

11755 SW 18TH STREET
UNIT 409
MIAMI, FL 33175

FEI Number: 55-0874582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PELIER, ROBERT N ESQ.
4649 PONCE DE LEON BLVD
SUITE 305
CORAL GABLES, FL 331462118 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: D'ARCE, JUAN F JR.
Address: PO BOX 351448
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: D'ARCE, JUAN F JR.
Address: 11755 SW 18TH STREET
City-St-Zip: MIAMI, FL 33135

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: JUAN F. D' ARCE, JR.

P

05/02/2008

Electronic Signature of Signing Officer or Director

_____ Date