2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P04000107523

Entity Name: ANNASARA, INC.

Current Principal Place of Business:

4849 QUEEN PAL TERRACE NE
ST PETERSBURG, FL 33703

New Principal Place of Business:

4849 QUEEN PALM TERRACE NE
ST PETERSBURG, FL 33703

Current Mailing Address:

4849 QUEEN PAL TERRACE NE
ST PETERSBURG, FL 33703

New Mailing Address:

4849 QUEEN PALM TERRACE NE
ST PETERSBURG, FL 33703

FEI Number: 56-2471376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CAPPELLI, MICHELLE
1100 NORTH SHORE DRIVE NE
#402
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

CAPPELLI, MICHELLE
4849 QUEEN PALM TERRACE NE
ST. PETERSBURG, FL 33703 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: _____ 04/30/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CAPPELLI, MICHELLE
Address: 1100 NORTH SHORE DRIVE NE #402
City-St-Zip: ST. PETERSBURG, FL 33701

Title: VP ( ) Delete
Name: MCCORD, MARLENE
Address: 1 BEACH DR. SE #805
City-St-Zip: ST. PETERSBURG, FL 33701

Title: S (X) Delete
Name: MCCORD, MARCUS
Address: 1 BEACH DR. SE #805
City-St-Zip: ST. PETERSBURG, FL 33701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P- S (X) Change ( ) Addition
Name: CAPPELLI, MICHELLE
Address: 4849 QUEEN PALM TERRACE NE
City-St-Zip: ST. PETERSBURG, FL 33703

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: MARLENE MCCORD VP 04/30/2009
Electronic Signature of Signing Officer or Director — Date