

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000148562

FILED
Jun 19, 2008
Secretary of State**Entity Name:** ETHELBERT INC**Current Principal Place of Business:**16304 SW 48 ST
MIRAMAR, FL 33027 US**New Principal Place of Business:**8362 PINES BLVD
345
PEMBROKE PINES, FL 33024 US**Current Mailing Address:**16304 SW 48 ST
MIRAMAR, FL 33027 US**New Mailing Address:**8362 PINES BLVD
345
PEMBROKE PINES, FL 33024 US**FEI Number:** 20-1796287**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WATSON, NOEL E
16304 SW 48TH ST
MIRAMAR, FL 33027 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**OFFICERS AND DIRECTORS:****Title:** P () Delete
Name: WATSON, NOEL E
Address: 16304 SW 48TH ST MIRAMAR
City-St-Zip: MIRAMAR, FL 33027 US**Title:** VP () Delete
Name: HTLTON, TAMIQUE
Address: 4711 NW 41 ST
City-St-Zip: LAUDERDALE LAKES, FL 33319**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** T (X) Change () Addition
Name: HILTON, TAMIQUE
Address: 4711 NW 41 ST
City-St-Zip: LAUDERDALE LAKES, FL 33319**Title:** VP () Change (X) Addition
Name: WATSON, BINGS A
Address: 7841 BILTMORE BLVD.
City-St-Zip: MIRAMAR, FL 33023**Title:** S () Change (X) Addition
Name: ALEXANDER, LUDENCE C
Address: 20050 NW 33 AVE
City-St-Zip: MIAMI GARDENS, FL 33056

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: NOEL E WATSON

P

06/19/2008

Electronic Signature of Signing Officer or Director_____
Date