

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000161773

Entity Name: IPON CORPORATION

FILED  
Jan 12, 2009  
Secretary of State

## Current Principal Place of Business:

14781 ROYAL OAK CT  
FT MYERS, FL 33913 US

## New Principal Place of Business:

## Current Mailing Address:

4135 UMBRIA LN, 411  
FT MYERS, FL 33916

## New Mailing Address:

4135 UMBRIA LN  
411  
FT MYERS, FL 33916

FEI Number: 57-1215092

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

METRO BUSINESS SOLUTIONS, INC.  
3940 METRO PKWY  
105  
FORT MYERS, FL 33916 US

## Name and Address of New Registered Agent:

METRO BUSINESS AGENCY INC  
5245 RAMSEY WAY  
4  
FORT MYERS, FL 33907 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: METRO BUSINESS AGENCY INC

01/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ARAUJO, GEORGE  
Address: 3630 PINE OAK CIR #107  
City-St-Zip: FT MYERS, FL 33916 US

Title: S ( ) Delete  
Name: SA FACO, GARDENIA MARIA  
Address: 3630 PINE OAK CIR #107  
City-St-Zip: FT MYERS, FL 33916 US

Title: D ( ) Delete  
Name: ALVES SOUZA, THIAGO  
Address: 3650 PINE OAK CIR #107  
City-St-Zip: FT MYERS, FL 33916 US

Title: D (X) Delete  
Name: RAMOS, CLEBER S  
Address: 2429 MAE AVE SW  
City-St-Zip: LEHIGH ACRES, FL 33973 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ARAUJO, GEORGE  
Address: 4135 UMBRIA LN# 411  
City-St-Zip: FT MYERS, FL 33916 US

Title: S (X) Change ( ) Addition  
Name: SA FACO, GARDENIA MARIA  
Address: 4135 UMBRIA LN# 411  
City-St-Zip: FT MYERS, FL 33916 US

Title: D (X) Change ( ) Addition  
Name: ALVES SOUZA, THIAGO  
Address: 4135 UMBRIA LN# 411  
City-St-Zip: FT MYERS, FL 33916 US

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: GEORGE ARAUJO

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date