

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162289

Entity Name: DREAMS 2 CHERISH, INC.

FILED  
Feb 21, 2009  
Secretary of State

## Current Principal Place of Business:

8961 SW 197 STREET  
MIAMI, FL 33157

## New Principal Place of Business:

22400 OLD DIXIE HWY  
16  
MIAMI, FL 33170

## Current Mailing Address:

PO BOX 165132  
MIAMI, FL 33116

## New Mailing Address:

1445 WELLINGTON CT  
CAPE CORAL, FL 33904

FEI Number: 26-3045379

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HILL MORRISON, LAURA ESQ.  
248 N. DR. ML. KING JR BLVD.  
DAYTON BEACH, FL 32114 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: P ( ) Delete  
Name: BROTT, CAROL  
Address: 1445 WELLINGTON COURT  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP ( ) Delete  
Name: HEARST BROTT, ALLYSON  
Address: 8961 SW 197 STREET  
City-St-Zip: MIAMI, FL 33157

Title: TS ( ) Delete  
Name: BROTT, THOMAS  
Address: 1445 WELLINGTON COURT  
City-St-Zip: CAPE CORAL, FL 33157

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TS (X) Change ( ) Addition  
Name: BROTT, THOMAS  
Address: 1445 WELLINGTON COURT  
City-St-Zip: CAPE CORAL, FL 33904

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: CAROL BROTT

P

02/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date