2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# P05000012006

Entity Name: CAPOEIRA VOLTA AO MUNDO, INC.

Current Principal Place of Business:

2817 BEE RIDGE RD
SARASOTA, FL 34239

New Principal Place of Business:

4672 MCINTOSH LN
SARASOTA, FL 34232

Current Mailing Address:

2817 BEE RIDGE RD
SARASOTA, FL 34239

New Mailing Address:

4672 MCINTOSH LN
SARASOTA, FL 34232

FEI Number: 20-2214252 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COSTA, RONY
2817 BEE RIDGE RD
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

COSTA, RONY
4672 MCINTOSH LN
SARASOTA, FL 34232 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: CHERI COSTA DS 06/16/2009
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: DP ( ) Delete
Name: COSTA, RONY
Address: 2817 BEE RIDGE RD
City-St-Zip: SARASOTA, FL 34239

Title: DS ( ) Delete
Name: COSTA, CHERI
Address: 2817 BEE RIDGE RD
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: COSTA, RONY
Address: 4672 MCINTOSH LN
City-St-Zip: SARASOTA, FL 34232

Title: DS (X) Change ( ) Addition
Name: COSTA, CHERI
Address: 4672 MCINTOSH LN
City-St-Zip: SARASOTA, FL 34232

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: CHERI COSTA DS 06/16/2009
Electronic Signature of Signing Officer or Director Date