

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000045299

Entity Name: F&F VENTURES, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

925 EASTERWOOD CT SE
PALM BAY, FL 32909

New Principal Place of Business:

4191 N STATE ROAD 7
LAUDERDALE LAKES, FL 33319

Current Mailing Address:

925 EASTERWOOD CT SE
PALM BAY, FL 32909

New Mailing Address:

4191 N STATE ROAD 7
LAUDERDALE LAKES, FL 33319

FEI Number: 57-1219356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUDE, JEAN-LOUIS
925 EASTERWOOD CT SE
PALM BAY, FL 32909 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: PD () Delete
Name: CLERVIL, DIEUJUSTE
Address: 1980 RAINTREE AVENUE SE
City-St-Zip: PALM BAY, FL 32909

Title: STD () Delete
Name: JEAN-LOUIS, JUDE
Address: 925 EASTERWOOD CT SE
City-St-Zip: PALM BAY, FL 32909

Title: D () Delete
Name: MOMPREMIER, MATHIEU
Address: 1321 NW 1ST AVENUE
City-St-Zip: FORT LAUDERDALE, NY 33311

Title: VPD () Delete
Name: ST AMOUR, JEANNOT
Address: 1581 JACOBIN STREET, NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: TOUSSAINT, JOHN Y
Address: 420 NW 36TH ST
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change () Addition
Name: JEAN-LOUIS, JUDE
Address: 4191 N STATE ROAD 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

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

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: JUDE JEAN-LOUIS

STD

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date