2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000080769

Entity Name: MICA JIM INC

FILED May 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7922 GRAND BLVD

PORT RICHEY, FL 34668 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1125 8505 AIRWAY BLVD

PORT RICHEY, FL 34673 NEW PORT RICHEY, FL 34654

FEI Number: 20-2941489 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUSHEIKO, SELWYN
1021 EAST OAKWOOD STREET
WOODWARD, TROYANNA
8505 AIRWAY BLVD

TARPON SPRINGS, FL 34689 US NEW PORT RICHEY, FL 34654 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: TROYANNA WOODWARD 05/13/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: ZAMBROTTO, JAMES Name: WOODWARD, TROYANNA

Address: 7922 GRAND BLVD Address: 8505 AIRWAY BLVD

City-St-Zip: PORT RICHEY, FL 34668 US City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: DUSHEIKO, SELWYN Name: WOODWARD, PATRICK
Address: 1021 EAST OAKWOOD STREET Address: 8505 AIRWAY BLVD

City-St-Zip: TARPON SPRINGS, FL 34689 US City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: () Delete Title: D () Change (X) Addition

| Name: | City-St-Zip: | 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: TROYANNA WOODWARD P 05/13/2009