2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000106914

Entity Name: CINAMP, INC.

FILED Mar 16, 2009 Secretary of State

-	•				
Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
4290 S HV UNIT 101 CLERMON	VY 27 NT, FL 34711				
Current M	lailing Addres	s:	New Mailing Addres	New Mailing Address:	
4290 S HWY 27 UNIT 101 CLERMONT, FL 34711			13520 VIA ROMA CIRCLE CLERMONT, FL 34711		
FEI Number: 98-0478568 FE		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
CLERMON	ROMA CIRCL NT, FL 34711	US			
	named entity set of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			gent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () STEVEN, WILL 13520 VIA ROM CLERMONT, FI	1A CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () STEVEN, YVON 13520 VIA RON CLERMONT, FI	1A CIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: WILLIAM STEVEN PD 03/16/2009