2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 29, 2009
Secretary of State

DOCUMENT# P05000134807

Entity Name: BLACK ORCHID ENTERPRISES, INC.

Current Principal Place of Business:

5600 COLLINS AVENUE
PHB
MIAMI BEACH, FL 33140

New Principal Place of Business:

3560 N.W. 115TH AVENUE
SUITE A
DORAL, FL 33178

Current Mailing Address:

P.O. BOX 403246
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 20-3590888 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VETRO, ANGELA J
5600 COLLINS AVENUE
PHB
MIAMI BEACH, FL 33140 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

OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete
Name: VETRO, ANGELA J
Address: 5600 COLLINS AVE PHB
City-St-Zip: MIAMI BEACH, FL 33140

Title: D ( ) Delete
Name: WARES, MICHAEL S
Address: 280 N.W. 121ST TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change ( ) Addition
Name: WARES, MICHAEL S
Address: 280 N.W. 121ST TERRACE
City-St-Zip: CORAL SPRINGS, FL 33071

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: MICHAEL S. WARES DVP 06/29/2009

Electronic Signature of Signing Officer or Director — Date