2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000037116

Entity Name: PART OF INCORPORATED

FILED Apr 06, 2009 Secretary of State

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

3060 S MIAMI AVE. 550 NE 96TH STREET

MIAMI, FL 33129 US MIAMI SHORES, FL 33138 US

Current Mailing Address: New Mailing Address:

3060 S MIAMI AVE. PO BOX 530448

MIAMI, FL 33129 MIAMI SHORES, FL 33153 US

FEI Number: 01-0859600 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAINT, TIARA

SAINT, TIARA 550 NE 96TH STREET 901 S. ATLANTIC AVENUE

COCOA BEACH, FL 32931 US US MIAMI SHORES, FL 33138

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: 04/06/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SAINT, TIARA SAINT, TIARA Name: Name: 901 S. ATLANTIC AVENUE 550 NE 96TH STREET Address: Address:

City-St-Zip: COCOA BEACH, FL 32931 US City-St-Zip: MIAMI SHORES, FL 33138 US

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

GIUSSANI, CLAUDIO Name: Name: SAINT, KAUKUTA 901 S. ATLANTIC AVENUE 550 NE 96TH STREET Address: Address:

COCOA BEACH, FL 32931 US MIAMI SHORES, FL 33138 US City-St-Zip: City-St-Zip:

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

SAINT, AQUARELA Name: SAINT, AQUARELA Name: 901 S. ATLANTIC AVENUE Address: 550 NE 96TH STREET Address: City-St-Zip: COCOA BEACH, FL 32931 US City-St-Zip: MIAMI SHORES, FL 33138 US

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.

Ρ SIGNATURE: TIARA SAINT 04/06/2009