2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075250

Entity Name: WING BLING CORP.

FILED Jun 24, 2009 Secretary of State

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

5420 S PENDANT POINT 5420 S PENDANT POINT FLORAL CITY, FL 34436 20

Current Mailing Address: New Mailing Address:

5420 S PENDANT POINT FLORAL CITY, FL 34436 5420 S PENDANT POINT FLORAL CITY, FL 34436 20

FEI Number: 20-4956559 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:

DAVIS, BRADLEY J ESQUIRE 100 TECHNOLOGY PARK SUITE 170 LAKE MARY, FL 32746 US KARLA, RUBIN J MS 5420 S. PENDANT POINT FLORAL CITY, FL 34436 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: KARLA J RUBIN 06/24/2009

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: RUBIN, MICHAEL D Name: RUBIN, MICHAEL D

 Name:
 RUBIN, MICHAEL D
 Name:
 RUBIN, MICHAEL D

 Address:
 6635 EAST TURNER CAMP ROAD
 Address:
 P.O. BOX 1867

 City-St-Zip:
 INVERNESS, FL 34453
 City-St-Zip:
 INVERNESS, FL 34451

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

 Name:
 Name:
 RUBIN, KARLA J

 Address:
 Address:
 P.O.BOX 1867

 City-St-Zip:
 City-St-Zip:
 INVERNESS, FL 34451

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: KARLA J RUBIN VP 06/24/2009