

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139638

FILED  
Mar 09, 2007  
Secretary of State

Entity Name: POISONED HEART CLOTHING, INC.

## Current Principal Place of Business:

100 EAST LINTON BLVD. SUITE 201B  
DELRAY BEACH, FL 33483 US

## New Principal Place of Business:

2026 ALTA MEADOWS LANE  
#905  
DELRAY BEACH, FL 33444 US

## Current Mailing Address:

100 EAST LINTON BLVD. SUITE 201B  
DELRAY BEACH, FL 33483 US

## New Mailing Address:

2026 ALTA MEADOWS LANE  
#905  
DELRAY BEACH, FL 33444 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEBLANC, JOSEPH  
100 EAST LINTON BLVD. SUITE 201B  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

LEBLANC, JOSEPH  
2026 ALTA MEADOWS LANE  
#905  
DELRAY BEACH, FL 33444 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: JOSEPH LEBLANC

03/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: LEBLANC, JOSEPH  
Address: 100 EAST LINTON BLVD. SUITE 201B  
City-St-Zip: DELRAY BEACH, FL 33483

Title: P ( ) Delete  
Name: WHITE, PETER M  
Address: 6732 WHITE BLOSSOM CIR  
City-St-Zip: JACKSONVILLE, FL 32258

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: LEBLANC, JOSEPH  
Address: 2026 ALTA MEADOWS LANE #905  
City-St-Zip: DELRAY BEACH, FL 33444

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH LEBLANC

VP

03/09/2007

Electronic Signature of Signing Officer or Director

Date