2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141987

Entity Name: EASY CONNECTION, INC

FILED Apr 21, 2009 Secretary of State

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

1470 NE 123RD ST APT O 715 1470 NE 123RD ST APT # 715 NORTH MIAMI, FL 33161 NORTH MIAMI, FL 33161

Current Mailing Address: New Mailing Address:

1470 NE 123RD ST APT O 715 1470 NE 123RD ST APT # 715 NORTH MIAMI, FL 33161 NORTH MIAMI, FL 33161

FEI Number: 20-5878155 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:

 SUZETE, MAGALHAES
 SUZETE, MAGALHAES

 1470 NE 123RD ST APT 0 715
 1470 NE 123RD ST APT # 715

 NORTH MIAMI, FL 33161
 US

 NORTH MIAMI, FL 33161
 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: 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 DP
 () Delete

 Name:
 SUZETE, MAGALHAES

 Address:
 1470 NE 123RD ST APT O 715

 City-St-Zip:
 NORTH MIAMI, FL 33161

Title: DVP () Delete
Name: CAMPOS, JOAO A

Address: 1470 NE 123RD ST APT O 715 City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SUZETE, MAGALHAES
Address: 1470 NE 123RD ST APT # 715
City-St-Zip: NORTH MIAMI, FL 33161

Title: DVP (X) Change () Addition

Name: CAMPOS, JOAO A

Address: 1470 NE 123RD ST APT # 715 City-St-Zip: NORTH MIAMI, FL 33161

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: SUZETE MAGALHAES DP 04/21/2009