## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000008752

Entity Name: GREENLEAFE SALES & MARKETING, INC.

FILED Apr 29, 2008 Secretary of State

| Current Principal Place of Business:          |  |                |                          | New Principal Place of Business:             |   |
|---|--|----------------|--------------------------|--|---|
|   | ES BLVD., SU<br>KE PINES, FL                           |                |                          |  |   |
| Current Mailing Address:                      |  |                |                          | New Mailing Address:                         |   |
| 10081 PIN<br>PEMBRO                           | ES BLVD., SU<br>KE PINES, FL                           | ITE C<br>33024 |                          |  |   |
| FEI Number                                    | : 30-0400222   | FEI Nu         | ımber Applied For()      | FEI Number Not Applicable ( )                | Certificate of Status Desired ( )       |
| Name and Address of Current Registered Agent: |  |                |                          | Name and Address of New Registered Agent:    |   |
| 10081 PIÑ                                     | ARNOLD M JF<br>ES BLVD., SU<br>KE PINES, FL            | ITE C          | US                       |  |   |
|   | e named entity<br>e of Florida.                        | submits        | this statement for the p | ourpose of changing its register             | ed office or registered agent, or both, |
| SIGNATU                                       | RE:  |                |                          |  |   |
| Electronic Signature of Registered Agent      |  |                |                          | ent  | Date                                    |
| Election Car                                  | mpaign Financin  | g Trust F      | und Contribution ( ).    |  |   |
| OFFICERS AND DIRECTORS:                       |  |                |                          | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |   |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | PD (<br>BARON, JAME:<br>16421 NE 34TH<br>N. MIAMI BCH, | HAVE.          | 0                        | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change( ) Addition                  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SD (<br>PRONGAY, TH<br>8831 SW 149T<br>MIAMI, FL 331   | H ST.          |                          | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                 |

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: JAMES D. BARON PD 04/29/2008