2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# P07000043717

Entity Name: SEEQUENT PHOTOGRAPHY, INC.

Current Principal Place of Business:

713 GARDENS DRIVE
#206
POMPANO BEACH, FL 33069 US

New Principal Place of Business:

Current Mailing Address:

713 GARDENS DRIVE
#206
POMPANO BEACH, FL 33069 US

New Mailing Address:

FEI Number: 20-8809982 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, RYAN
713 GARDENS DRIVE
#206
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

ALMEDO, KARIBAY
713 GARDENS DRIVE
#206
POMPANO BEACH, FL 33069 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: KARIBAY ALMEDO 03/31/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: COHEN, RYAN
Address: 713 GARDENS DRIVE #206
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VP ( ) Delete
Name: ALMEDO, KARIBAY
Address: 713 GARDENS DRIVE #206
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: COHEN, RYAN MR.
Address: 713 GARDENS DRIVE #206
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: P (X) Change ( ) Addition
Name: ALMEDO, KARIBAY MRS.
Address: 713 GARDENS DRIVE #206
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: S ( ) Change (X) Addition
Name: ALMEDO, ELISABETH MRS.
Address: 713 GARDENS DRIVE #206
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: T ( ) Change (X) Addition
Name: ALMEDO, JOSE R MR.
Address: 713 GARDENS DRIVE #206
City-St-Zip: POMPANO BEACH, FL 33069

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: KARIBAY ALMEDO P 03/31/2009
Electronic Signature of Signing Officer or Director Date