2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000050633

MARELLI, ALESSIA

MIAMI BEACH, FL 33139

C/O REDILCO INT'L RE, 1560 LENOX AVE #102

Name:

Address: City-St-Zip:

Entity Name: TENDERSUN CORP.

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 100 LINCOLN RD SUITE # 547 MIAMI BEACH, FL 33139 **New Mailing Address: Current Mailing Address:** 100 LINCOLN RD SUITE # 547 MIAMI BEACH, FL 33139 FEI Number: 14-2003124 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: BOLOGNA, STEFANIA ESQ 150 S.E. 2ND AVENUE, SUITE #1010 MIAMI, FL 33131 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ZORZI, ANNAMARIA Name: Name: 100 LINCOLN RD #547 Address: Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: () Delete Title: VSTD Title: () Change () Addition Name: GAROUFALIAS ZORZI, VERONICA Name: 650 WEST AVENUE, #2512 Address: Address: MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip: () Delete Title: Title: AS () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: VERONICA GAROUFALIAS ZORZI V 02/16/2009