2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000056639

Entity Name: BAR BLENDS MARKETING INC

FILED Apr 12, 2009 Secretary of State

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

2760 BEAGLE PATH WAY PALM HARBOR, FL 34683 US

Current Mailing Address: New Mailing Address:

160 ISLE OF VENICE 401 E LAS OLAS BOULEVARD SUITE #3 SUITE 130-141

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 US

FEI Number: 26-0280118 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:

BLANKENSHIP, KEVIN

160 ISLE OF VENICE

SUITE #3

SUITE 130-141

FORT LAUDERDALE EL 22201 LIS

BLANKENSHIP, KEVIN

401 E LAS OLAS BOULEVARD

SUITE 130-141

FORT LAUDERDALE EL 22201

FORT LAUDERDALE, FL 33301 US FORT LAUDERDALE, FL 33301 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: KEVIN BLANKENSHIP 04/12/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: BLANKENSHIP, KEVIN Name: BLANKENSHIP, KEVIN

Address: 160 ISLE OF VENICE, SUITE #3 Address: 401 E LAS OLAS BOULEVARD, SUITE 130-141

City-St-Zip: FORT LAUDERDALE, FL 33301 US City-St-Zip: FORT LAUDERDALE, FL 33301 US

Title: VP () Delete Title: () Change () Addition

 Name:
 HEBELER, STEPHEN P
 Name:

 Address:
 2760 BEAGLE PATH WAY
 Address:

 City-St-Zip:
 PALM HARBOR, FL 34683 US
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 REES, IRENE M
 Name:

 Address:
 214 CORKWOOD DRIVE
 Address:

 City-St-Zip:
 OLDSMAR, FL 34677 US
 City-St-Zip:

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: KEVIN BLANKENSHIP PD 04/12/2009