

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000062296

Entity Name: UCANTU INVESTMENTS INC

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

945 PRESCOTT BLVD
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

945 PRESCOTT BLVD
DELTONA, FL 32738

New Mailing Address:

8850 N. MIAMI AVE
EL PORTEL, FL 33150

FEI Number: 26-0235678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKINSON, KAMILLE
945 PRESCOTT BLVD
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

SINCLAIR, MONIQUE
945 PRESCOTT BLVD
DELTONA, FL 32738 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: MONIQUE SINCLAIR

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SINCLAIR, MONIQUE
Address: 945 PRESCOTT BLVD
City-St-Zip: DELTONA, FL 32738

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: FRANCIS, RONALD A
Address: 8850 N. MIAMI AVE
City-St-Zip: EL PORTEL, FL 33150

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: MONIQUE SINCLAIR

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date