2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000064309

City-St-Zip:

Entity Name: SON OF MY RIGHT HAND INC

FILED Jun 01, 2009 Secretary of State

Current Principal Place of Business:			N Dain	New Principal Place of Business:		
Current P	rincipai Piace	of Business:	New Princ	ipai Piace o	r Business:	
	ER BLVD E D, FL 33803					
Current Mailing Address:			New Maili	New Mailing Address:		
	ER BLVD E D, FL 33803					
FEI Number	: 02-0802253	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
3117 BOG	LUEVERTIA ER BLVD E D, FL 33803	US				
	e named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () MOORE, BENJA 3117 BOGER B LAKELAND, FL	SLVD E	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	P () MOORE, LUEV 3117 BOGER B LAKELAND, FL	SLVD E	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () MOORE, RONA 3117 BOGER B LAKELAND, FL	SLVD E	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address:	()	Delete	Title: Name: Address:	DAVIS, CLAR) Change (X) Addition E DINGLE DRIVE	

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.

City-St-Zip:

SIGNATURE: BENJAMIN MOORE CEO 06/01/2009

FLORENCE, SC 29505 US