

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000096203

FILED
Jul 30, 2009
Secretary of State**Entity Name:** GRATITUDE ENTERPRISE, CORP.**Current Principal Place of Business:**3561 W HILLSBORO BLVD
H106
COCONUT CREEK, FL 33073**New Principal Place of Business:**18900 NW 2ND AVE
SUITE B
MIAMI GARDENS, FL 33169**Current Mailing Address:**3561 W HILLSBORO BLVD
H106
COCONUT CREEK, FL 33073**New Mailing Address:**18900 NW 2ND AVE
SUITE B
MIAMI GARDENS, FL 33169**FEI Number:** 33-1178972**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**GAZOTO DA SILVA, GRACE B
3561 W HILLSBORO BLVD
H106
COCONUT CREEK, FL 33073 US**Name and Address of New Registered Agent:**GAZOTO DA SILVA, GRACE B
18900 NW 2ND AVE
SUITE B
MIAMI GARDENS, FL 33169 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: AURELIO SILVA

07/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: GAZOTO DA SILVA, GRACE B
Address: 3561 W HILLSBORO BLVD H106
City-St-Zip: COCONUT CREEK, FL 33073**Title:** DVP () Delete
Name: GABRIEL DA SILVA, AURELIO
Address: 3561 W HILLSBORO BLVD H106
City-St-Zip: COCONUT CREEK, FL 33073**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DP (X) Change () Addition
Name: GAZOTO DA SILVA, GRACE B
Address: 18900 NW 2ND AVE SUITE B
City-St-Zip: MIAMI GARDENS, FL 33169**Title:** DVP (X) Change () Addition
Name: GABRIEL DA SILVA, AURELIO
Address: 18900 NW 2ND AVE SUITE B
City-St-Zip: MIAMI GARDENS, FL 33169

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: AURELIO SILVA

DVP

07/30/2009

Electronic Signature of Signing Officer or Director

Date