

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000119882

Entity Name: FLIPSHAKE INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

7566 SW 102 STREET
MIAMI, FL 33156

New Principal Place of Business:

7566 SW 102 STREET
MIAMI, FL 33156 US

Current Mailing Address:

7566 SW 102 STREET
MIAMI, FL 33156

New Mailing Address:

7566 SW 102 STREET
MIAMI, FL 33156 US

FEI Number: 26-1378071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT CORPORATE SERVICES, INC.
355 ALHAMBRA CIRCLE
SUITE 801
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Title: D, P () Delete
Name: SALADRIGAS, LUIS
Address: 7566 SW 102 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: T () Delete
Name: SALADRIGAS, LUIS
Address: 7566 SW 102 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: D, S () Delete
Name: SALADRIGAS, JORGE
Address: 6237 SPALDING DRIVE
City-St-Zip: NORCROSS, GA 30092 US

Title: D (X) Delete
Name: SALADRIGAS, CARLOS SR.
Address: 7566 SW 102 STREET
City-St-Zip: MIAMI, FL 33156 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: SALADRIGAS, LUIS
Address: 7566 SW 102 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: DS (X) Change () Addition
Name: SALADRIGAS, JORGE
Address: 6237 SPALDING DRIVE
City-St-Zip: NORCROSS, GA 30092 US

Title: D (X) Change () Addition
Name: SALADRIGAS SR, CARLOS
Address: 7566 SW 102 STREET
City-St-Zip: MIAMI, FL 33156 US

Title: () Change () Addition
Name:
Address:
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: LUIS SALADRIGAS

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date