

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002236

Entity Name: PAULEMILESIGNATUREFILMS INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

2005 TREE FORK LANE
LONGWOOD, FL 32750

New Principal Place of Business:

2005 TREE FORK LANE
#113
LONGWOOD, FL 32750

Current Mailing Address:

2005 TREE FORK LANE
LONGWOOD, FL 32750

New Mailing Address:

2005 TREE FORK LANE
#113
LONGWOOD, FL 32750

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYLES, ELENA
118 TILLMAN STREET
PALATKA, FL 32177 US

Name and Address of New Registered Agent:

FEQUIERE, PAULEMILE
2005 TREE FORK LANE
SUITE 113
LONGWOOD, FL 32750 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: PAULEMILE FEQUIERE

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FEQUIERE, PAULEMILE
Address: 2005 TREE FORK LANE
City-St-Zip: LONGWOOD, FL 32750

Title: VP (X) Delete
Name: CALLOWAY, MIMI M
Address: 2005 TREE FORK LANE
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FEQUIERE, PAULEMILE
Address: 2005 TREE FORK LANE STE 113
City-St-Zip: LONGWOOD, FL 32750

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: PAULEMILE FEQUIERE

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date