2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2009
Secretary of State

DOCUMENT# P08000003680

Entity Name: CARDANES, INC.

Current Principal Place of Business:

1852 S.W. 163RD AVE
MIRAMAR, FL 33027

New Principal Place of Business:

9327 SW 66TH LOOP
OCALA, FL 34481 US

Current Mailing Address:

1852 S.W. 163RD AVE
MIRAMAR, FL 33027

New Mailing Address:

9327 SW 66TH LOOP
OCALA, FL 34481 US

FEI Number: 26-1819222 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CIVIDANES-CARTER, DORIS
1852 S.W. 163RD AVE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

CIVIDANES-CARTER, DORIS
9327 SW 66TH LOOP
OCALA, FL 34481 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: 05/11/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete
Name: CIVIDANES-CARTER, DORIS
Address: 1852 S.W. 163RD AVE
City-St-Zip: MIRAMAR, FL 33027

Title: VP ( ) Delete
Name: CATER, PHILIP L
Address: 1852 S.W. 163RD AVE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: CIVIDANES-CARTER, DORIS
Address: 9327 SW 66TH LOOP
City-St-Zip: OCALA, FL 34481 US

Title: VP (X) Change ( ) Addition
Name: CATER, PHILIP L
Address: 9327 SW 66TH LOOP
City-St-Zip: OCALA, FL 34481 US

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: DORIS CIVIDANES-CARTER PSTD 05/11/2009
Electronic Signature of Signing Officer or Director Date