

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000013157

Entity Name: STREETMAFIABMX INC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

10401 RAINBOW RIDGE
WEEKI WACHEE, FL 34613

New Principal Place of Business:

9371 LAKEFRONT ROAD
WEEKI WACHEE, FL 34613

Current Mailing Address:

10401 RAINBOW RIDGE
WEEKI WACHEE, FL 34613

New Mailing Address:

FEI Number: 30-0466357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONDS, CHRISTIAN
10401 RAINBOW RG CT
WEEKI WACHEE, FL 34613 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: DIR () Delete
Name: SIMMONDS, CHRISTIAN
Address: 10401 RAINBOW RG CT
City-St-Zip: WEEKI WACHEE, FL 34613

Title: DIR () Delete
Name: SIMMONDS, LISA
Address: 10401 RAINBOW RG CT
City-St-Zip: WEEKI WACHEE, FL 34613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

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: CHRISTIAN SIMMONDS

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04/24/2009

Electronic Signature of Signing Officer or Director

Date