

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000014579

FILED
Mar 18, 2009
Secretary of State

Entity Name: WHOLESAL LEADS AND LABELS INC

Current Principal Place of Business:

5452 WEST CRENSHAW
SUITE # 4
TAMPA, FL 33634

New Principal Place of Business:

14760 SAN MARSALA CT.
TAMPA, FL 33626 US

Current Mailing Address:

5452 WEST CRENSHAW
SUITE # 4
TAMPA, FL 33634

New Mailing Address:

14760 SAN MARSALA CT.
TAMPA, FL 33626 US

FEI Number: 26-1927310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASPER, DAVID
14760 SAN MARSALA CT
TAMPA, FL 33626 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: PS () Delete
Name: KASPER, DAVID
Address: 14760 SAN MARSALA CT
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: KASPER, DAVID
Address: 14760 SAN MARSALA CT
City-St-Zip: TAMPA, FL 33626 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: DAVID KASPER

PS

03/18/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date