2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000020292

Entity Name: BANKIN BENJAMIN'S CLOTHING, INC.

FILED Mar 22, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11309 OYSTER BAY CIRCLE 11055 BELLE HAVEN DRIVE NEW PORT RICHEY, FL 34654 NEW PORT RICHEY, FL 34654

Current Mailing Address: New Mailing Address:

11309 OYSTER BAY CIRCLE PO BOX 598

NEW PORT RICHEY, FL 34654 PORT RICHEY, FL 34673

FEI Number: 26-2058066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WACHTEL, BRIAN
11309 OYSTER BAY CIRCLE
NEW PORT RICHEY, FL 34654 US

WACHTEL, BRIAN
11055 BELLE HAVEN DRIVE
NEW PORT RICHEY, FL 34654 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: 03/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition

 Name:
 WACHTEL, BRIAN
 Name:
 WACHTEL, BRIAN

 Address:
 11309 OYSTER BAY CIRCLE
 Address:
 11055 BELLE HAVEN DRIVE

 City-St-Zip:
 NEW PORT RICHEY, FL 34654
 City-St-Zip:
 NEW PORT RICHEY, FL 34654

Title: VP () Delete Title: VP (X) Change () Addition

Name: WACHTEL, BRIAN Name: WACHTEL, BRIAN

Address: 11309 OYSTER BAY CIRCLE Address: 11055 BELLE HAVEN DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34654 City-St-Zip: NEW PORT RICHEY, FL 34654

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: BRIAN WACHTEL PSTD 03/22/2009