

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000022556

Entity Name: SBE SOLUTIONS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

4546 CAMBRIDGE STREET
WEST PALM BEACH, FL 33415

New Principal Place of Business:

Current Mailing Address:

4546 CAMBRIDGE STREET
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 61-1556746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TALBERT, PHILIP H II
908 FIRETREE ROAD
NORTH PALM BEACH, FL 33408 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: P () Delete
Name: SHENAVAR, DEREK
Address: 4546 CAMBRIDGE STREET
City-St-Zip: WEST PALM BEACH, FL 33415

Title: EXVP () Delete
Name: TALBERT, PHILIP H II
Address: 908 FIRETREE ROAD
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHENAVAR, DEREK
Address: 3209 B GARDENS EAST DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: DEREK H SCHENAVAR

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date