

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000025884

**FILED**  
**Feb 08, 2009**  
**Secretary of State**

**Entity Name:** GIGGAMUSIC CORPORATION

**Current Principal Place of Business:**

18459 PINES BLVD #204  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

18459 PINES BLVD #204  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 22-3977274

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

MICHAEL, LEWITT  
18459 PINES BLVD  
SUITE 204  
PEMBROKE PINES, FL 33029 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:** MICHAEL LEWITT

02/08/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PSD ( ) Delete  
**Name:** LEWITT, MICHAEL  
**Address:** 18459 PINES BLVD #204  
**City-St-Zip:** PEMBROKE PINES, FL 33029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**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:** MICHAEL LEWITT

PRES

02/08/2009

Electronic Signature of Signing Officer or Director

Date