

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000028012

FILED
Apr 19, 2009
Secretary of State

Entity Name: BLACK AND DENIM INCORPORATED

Current Principal Place of Business:

3450 PALENCIA DR, STE 916
TAMPA, FL 33618

New Principal Place of Business:

15302 WINTERWIND DR
TAMPA, FL 33624

Current Mailing Address:

PO BOX 276803
TAMPA, FL 33688

New Mailing Address:

FEI Number: 26-1937758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, ROBERTO A
6221 NORTH DALE MABRY HWY
SUITE 1713
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

TORRES, ROBERTO A
15302 WINTERWIND DR
TAMPA, FL 33624 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: ROBERTO TORRES

04/19/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: PEREZ, JULIO E
Address: 909 N. PARSONS AVE
City-St-Zip: SEFFNER, FL 33584 US

Title: VP () Delete
Name: MONTANEZ, LUIS
Address: 8551 TOUCHTON RD APT 1222
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: P () Delete
Name: TORRES, ROBERTO A
Address: 3450 PALENCIA DR, STE 916
City-St-Zip: TAMPA, FL 33618

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: GIL, MICHAEL
Address: 31828 SPOONFLOWER CIRCLE
City-St-Zip: WESLEY CHAPEL, FL 33454 US

Title: VP (X) Change () Addition
Name: MONTANEZ, LUIS
Address: 8550 TOUCHTON RD E APT 1222
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: P (X) Change () Addition
Name: TORRES, ROBERTO A
Address: 15302 WINTERWIND DR
City-St-Zip: TAMPA, FL 33624

Title: VP () Change (X) Addition
Name: FINDEISEN, CHRISTOPHER
Address: 4747 W WATERS AVE
City-St-Zip: TAMPA, FL 33614

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: ROBERTO TORRES

P

04/19/2009

Electronic Signature of Signing Officer or Director

Date