

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000028956

FILED  
Sep 01, 2009  
Secretary of State

Entity Name: PANDEMONIA CREATIVE LAB., INC.

**Current Principal Place of Business:**

100 BAYVIEW DR  
SUITE 1830  
SUNNY ISLES BEACH, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

100 BAYVIEW DR  
SUITE 1830  
SUNNY ISLES BEACH, FL 33160

**New Mailing Address:**

FEI Number: 75-3267274

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIBONY, MARYAM  
100 BAYVIEW DR  
SUITE 1830  
SUNNY ISLES BEACH, FL 33160 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SIBONY, MARYAM  
Address: 100 BAYVIEW DR, SUITE 1830  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

**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: MARYAM SIBONY

P

09/01/2009

Electronic Signature of Signing Officer or Director

Date