

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000053552

FILED  
Jul 30, 2009  
Secretary of State

Entity Name: PAMELA SUE ENTERPRISES, INC.

**Current Principal Place of Business:**

1050 OAKLAND DR  
MT DORA, FL 32757

**New Principal Place of Business:**

1080 FOREST DRIVE  
TAVARES, FL 32778

**Current Mailing Address:**

PO BOX 817  
MT DORA, FL 32756

**New Mailing Address:**

FEI Number: 80-0179875

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUE, PAMELA  
1050 OAKLAND DR  
MT DORA, FL 32757 US

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

SUE, PAMELA  
1080 FOREST DRIVE  
TAVARES, FL 32778 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: PAMELA SUE

07/30/2009

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: D ( ) Delete  
Name: SUE, PAMELA  
Address: 1050 OAKLAND DR  
City-St-Zip: MT DORA, FL 32757

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

Title: D (X) Change ( ) Addition  
Name: SUE, PAMELA  
Address: 1080 FOREST DRIVE  
City-St-Zip: TAVARES, FL 32778

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: PAMELA SUE

D

07/30/2009

Electronic Signature of Signing Officer or Director

Date