2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000055557

Entity Name: LOOK INTERNATIONAL INC

FILED May 14, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
512 S.W. S STUART, F	T. LUCIE CF L 34994	RESCENT US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
512 S.W. S STUART, F	T. LUCIE CF L 34994	RESCENT US			
FEI Number:	37-1569148	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
320 S. FLAN 347	ATES CORI MINGO ROA E PINES, FL				
The above r		submits this statement for the pur	pose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Agent		Date	
		93(2)(b), F.S., the corporation did not r	eceive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P, T (IBRAHIM, ASA) Delete \D LUCIE CRESCENT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	IBRAHIM, ASA	LUCIE CRESCENT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	IBRAHIM, MA	LUCIE CRESCENT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CARNEY, JOH	LUCIE CRESCENT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	IBRAHIM, DEA	LUCIE CRESCENT	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MAJD IBRAHIM MR 05/14/2009