

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000073603

FILED
Apr 16, 2009
Secretary of State

Entity Name: BLACK RABBIT ENTERPRISES INC.

Current Principal Place of Business:

5541 PUERTA DEL SOL BLVD
120
ST. PETERSBURG, FL 33715

New Principal Place of Business:

15210 AMBERLY DR.
1932
TAMPA, FL 33647

Current Mailing Address:

5541 PUERTA DEL SOL BLVD
120
ST. PETERSBURG, FL 33715

New Mailing Address:

15210 AMBERLY DR.
1932
TAMPA, FL 33647

FEI Number: 26-3118007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLACK, SCOTT A
5541 PUERTA DEL SOL BLVD
120
ST. PETERSBURG, FL 33715 US

Name and Address of New Registered Agent:

BLACK, SCOTT A
15210 AMBERLY DR.
1932
TAMPA, FL 33647 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: SCOTT A BLACK

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BLACK, BARBARA A
Address: 5541 PUERTA DEL SOL BLVD (UNIT 120)
City-St-Zip: ST. PETERSBURG, FL 33715

Title: COO () Delete
Name: BLACK, SCOTT A
Address: 5541 PUERTA DEL SOL BLVD (UNIT 120)
City-St-Zip: ST. PETERSBURG, FL 33715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLACK, BARBARA A
Address: 15210 AMBERLY DR. (UNIT 1932)
City-St-Zip: TAMPA, FL 33647

Title: COO (X) Change () Addition
Name: BLACK, SCOTT A
Address: 15210 AMBERLY DR. (UNIT 1932)
City-St-Zip: TAMPA, FL 33647

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: SCOTT A BLACK

COO

04/16/2009

Electronic Signature of Signing Officer or Director

Date