

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000079940

Entity Name: CONNECTED PRESTIGE INC.

FILED
Jun 26, 2009
Secretary of State

Current Principal Place of Business:

234 NORTH EAST 3RD ST.
UPH2
MIAMI, FL 33132

Current Mailing Address:

234 NORTH EAST 3RD ST.
UPH2
MIAMI, FL 33132

New Principal Place of Business:

701 BRICKELL AVENUE
1550
MIAMI, FL 33131

New Mailing Address:

1541 BRICKELL AVENUE
APT 3101
MIAMI, FL 33129

FEI Number: 26-3264248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROQUETTE, LUCIANO P
2750 NW 44TH STREET
606
OAKLAND PARK, FL 33309 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: SIDONS, DAVID B
Address: 234 NORTH EAST 3RD STREET # UPH2
City-St-Zip: MIAMI, FL 33132 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIDONS, DAVID B
Address: 1541 BRICKELL AVENUE, APT 3101
City-St-Zip: MIAMI, FL 33129 US

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: DAVID SIDONS

MR

06/26/2009

Electronic Signature of Signing Officer or Director

Date