2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000084261

Entity Name: CARIBONGO OF VENICE, INC.

5402 19TH AVENUE WEST

BRADENTON, FL 34209

Address:

City-St-Zip:

FILED Jul 01, 2009 Secretary of State

Entity Name: CARIBONGO OF VENICE, INC.					
Current P	rincipal Place	of Business:	New Principal Pl	New Principal Place of Business:	
UNIT #2	STREET EAS				
BRADENT	ON, FL 3420	3			
Current M	lailing Addres	ss:	New Mailing Add	New Mailing Address:	
6223 29TH STREET EAST UNIT #2 BRADENTON, FL 34203			UNIT #A	6003 28TH STREET EAST UNIT #A BRADENTON, FL 34203	
FEI Number:	: 26-3355532	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Addre	Name and Address of New Registered Agent:	
WHELPTON, MATTHEW 6223 29TH STREET EAST UNIT #2 BRADENTON, FL 34203 US			6003 28TH STREE UNIT #A	WHELPTON, MATTHEW 6003 28TH STREET EAST UNIT #A BRADENTON, FL 34203 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its regis	tered office or registered agent, or both,	
SIGNATUR	RE:			07/01/2009	
	Electron	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (X SAHM, FILIP 4018 78TH DR SARASOTA, FI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (WHELPTON, N 4107 61ST AVI BRADENTON,	ENUE EAST	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	T (JORDAN, PETI 5402 19TH AVI BRADENTON,	ENUE WEST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (JORDAN, JULI) Delete E	Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: MATTHEW WHELPTON PRES 07/01/2009