

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000084790

FILED  
May 01, 2009  
Secretary of State

Entity Name: SOMETHING 4 EVERYONE PACK & SEND INC

## Current Principal Place of Business:

106 HANCOCK BRIDGE PKWY  
D-15  
CAPE CORAL, FL 33990 US

## Current Mailing Address:

106 HANCOCK BRIDGE PKWY  
D-15  
CAPE CORAL, FL 33990 US

## New Principal Place of Business:

106 HANCOCK BRIDGE PKWY WEST  
D-15  
CAPE CORAL, FL 33991 US

## New Mailing Address:

106 HANCOCK BRIDGE PKWY WEST  
D-15  
CAPE CORAL, FL 33991 US

FEI Number: 26-3372771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VALCHINE, BHARGAVI  
106 HANCOCK BRIDGE PKWY  
D-15  
CAPE CORAL, FL 33990 US

## Name and Address of New Registered Agent:

VALCHINE, BHARGAVI  
106 HANCOCK BRIDGE PKWY WEST  
D-15  
CAPE CORAL, FL 33991 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: BHARGAVI VALCHINE

05/01/2009

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: P ( ) Delete  
Name: VALCHINE, BHARGAVI  
Address: 106 HANCOCK BRIDGE PKWY D-15  
City-St-Zip: CAPE CORAL, FL 33990 US

Title: VP ( ) Delete  
Name: PATEL, ARUNA  
Address: 106 HANCOCK BRIDGE PKWY D-15  
City-St-Zip: CAPE CORAL, FL 33990 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: VALCHINE, BHARGAVI  
Address: 106 HANCOCK BRIDGE PKWY WEST D-15  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: VP (X) Change ( ) Addition  
Name: PATEL, ARUNA  
Address: 106 HANCOCK BRIDGE PKWY WEST D-15  
City-St-Zip: CAPE CORAL, FL 33991 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: BHARGAVI VALCHINE

PRES

05/01/2009

Electronic Signature of Signing Officer or Director

Date