

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000089891

FILED
May 26, 2009
Secretary of State

Entity Name: BRIAN AND KAREN SALLE' INC.

Current Principal Place of Business:

1717 N. BAYSHORE DRIVE #207
MIAMI, FL 33132 US

New Principal Place of Business:

16 TIDEWATER DRIVE
ORMOND BEACH, FL 32174 US

Current Mailing Address:

1717 N. BAYSHORE DRIVE #207
MIAMI, FL 33132 US

New Mailing Address:

16 TIDEWATER DRIVE
ORMOND BEACH, FL 32174 US

FEI Number: 26-3596871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALLE', KAREN M
1717 N. BAYSHORE DRIVE #207
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

SALLE', KAREN M
16 TIDEWATER DRIVE
ORMOND BEACH, FL 32174 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: KAREN SALLE'

05/26/2009

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: DP () Delete
Name: SALLE', BRIAN T
Address: 1717 N. BAYSHORE DRIVE SUITE 207
City-St-Zip: MIAMI, FL 33132 US

Title: DVP () Delete
Name: SALLE', KAREN M
Address: 1717 N. BAYSHORE DRIVE SUITE 207
City-St-Zip: MIAMI, FL 33132 US

Title: T () Delete
Name: BROWN, JOSEPH
Address: 1717 N. BAYSHORE DRIVE SUITE 207
City-St-Zip: MIAMI, FL 33132 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SALLE', BRIAN T
Address: 16 TIDEWATER DRIVE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: DVP (X) Change () Addition
Name: SALLE', KAREN M
Address: 16 TIDEWATER DRIVE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP/T (X) Change () Addition
Name: KAPLAN, KEITH
Address: 16 TIDEWATER DRIVE
City-St-Zip: ORMOND BEACH, FL 32174 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: KAREN SALLE'

VP

05/26/2009

Electronic Signature of Signing Officer or Director

Date