2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000104222

City-St-Zip:

Entity Name: PEACE AND LOVE ENTERPRISES INC

FILED Aug 12, 2009 Secretary of State

		WAS EQUE ENTERN MOLONIA	· ·		
Current Principal Place of Business:			New Principal Place of Business:		
4328 EL P TAMPA, F					
Current Mailing Address:			New Mailing Address:		
4328 EL P TAMPA, F					
FEI Number	: 90-0428744	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
HUDSON, 4818 WES TAMPA, F	ST FLAMINGO	_			
	e named entity e of Florida.	submits this statement for the	purpose of changing i	its registered office or registered agent, or both,	
SIGNATUI					
	Electro	nic Signature of Registered Ag	gent	Date	
		93(2)(b), F.S., the corporation did r g Trust Fund Contribution ().	not receive the prior notic	ee.	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	ROCHETTE, M 335 RANKIN D		Title: Name: Address: City-St-Zip:	VD (X) Change () Addition ROCHETTE, MARIE A MRS. 335 RANKIN DR NEW PORT RICHEY, FL 34655	
Title: Name: Address: City-St-Zip:	PD (PEASE, MARY 334 W COMAN TAMPA, FL 33	ICHE AVE	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition PEASE, MARY R MRS. 334 W COMANCHE AVE TAMPA, FL 33604	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	PD () Change (X) Addition WETMORE, H. SCOTT MR. 5018 N. CLARK AVE. TAMPA, FL 33614 US	
Title: Name: Address:	() Delete	Title: Name: Address:	STD () Change (X) Addition HUDSON, LOVIE V MISS 4818 W. FLAMINGO RD.	

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.

City-St-Zip: TAMPA, FL 33611 US

SIGNATURE: LOVIE V. HUDSON STD 08/12/2009