

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33392

Entity Name: SATORI, LTD., INC.

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

1109 NE 16TH PLACE  
FT. LAUDERDALE, FL 33305 US

## New Principal Place of Business:

## Current Mailing Address:

1109 NE 16TH PLACE  
FT LAUDERDALE, FL 33305 US

## New Mailing Address:

1109 NE 16TH PLACE  
FT. LAUDERDALE, FL 33305 US

FEI Number: 41-1430336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, BEN  
1109 NE 16TH PLACE  
FT LAUDERDALE, FL 33305 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete  
Name: COBB, JEFF  
Address: 430 HOLIDAY RD  
City-St-Zip: GRANITE FALLS, MN 56241 US

Title: CFO (X) Delete  
Name: RISERBATO, ANGELA  
Address: 1650 N. DIXIE HWY  
City-St-Zip: FT. LAUDERDALE, FL 33305 US

Title: S (X) Delete  
Name: ROBINSON, BEN  
Address: 1109 NE 16TH PLACE  
City-St-Zip: FT LAUDERDALE, FL 33305 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: ROBINSON, BEN  
Address: 1109 NE 16TH PLACE  
City-St-Zip: FT. LAUDERDALE, FL 33305 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BEN ROBINSON

CEO

04/17/2009

Electronic Signature of Signing Officer or Director

Date