2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000016446

City-St-Zip:

CUTLER BAY, FL 33157

FILED Apr 22, 2009 Secretary of State

Entity Nar	me: BACKBON	NE, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
19602 SW CUTLER E	87 PL 3AY, FL 33157	US					
Current Mailing Address:			New Maili	New Mailing Address:			
	ESTA STREET ER, FL 33070	US	19602 SW CUTLER B	87 PL SAY, FL 33157	US		
FEI Number:	: 65-0406366	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desire	ed ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
ISLAMORA The above	OR DR ION LAKES ES' ADA, FL 33036		urpose of changing i	ts registered of	fice or registered agent,	or both,	
SIGNATUR							
01011/1101		c Signature of Registered Age	nt		Date		
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	TEJERA, PAÙL	., PLANTATION LK. EST.	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	S () TEJERA, IDA 4201 SW 87TH A MIAMI, FL 3316		Title: Name: Address: City-St-Zip:	VP (X) TEJERA, IDA 19602 SW 87 PI CUTLER BAY, F			
Title: Name:	VP (X) TEJERA, IDA	Delete	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.

City-St-Zip:

SIGNATURE: PAUL TEJERA Ρ 04/22/2009