2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2009
Secretary of State

DOCUMENT# P93000041386

Entity Name: BENSON INNOVATIONS, INC.

Current Principal Place of Business:

20553 OLD CUTTER RD - RESTAURANT
MIAMI, FL 33189 US

New Principal Place of Business:

Current Mailing Address:

20553 OLD CUTTER RD
MIAMI, FL 33189 US

New Mailing Address:

20553 OLD CUTTER RD - RESTAURANT
MIAMI, FL 33189 US

FEI Number: 65-0483000 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HASS, WILLIAM B
14150 SW 119 AVE
MIAMI, FL 33186 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: S ( ) Delete
Name: PLEESONTI, SANTAYA
Address: 8539 CUTLER COURT
City-St-Zip: MIAMI, FL 33189

Title: PD ( ) Delete
Name: PLEESONTI, CHALEAMVOOTHI
Address: 20553 OLD CUTLER ROAD
City-St-Zip: MIAMI, FL 33189

Title: VD ( ) Delete
Name: PLEESONTI, NATAYA
Address: 8539 CUTLER COUTRT
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SANTAYA PLEESONTI OWNE 02/21/2009
Electronic Signature of Signing Officer or Director Date