2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000059389

Entity Name: GOV PROMOTIONS, INC.

FILED Apr 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 16765 FISH HAWK BLVD LITHIA, FL 33547 **Current Mailing Address: New Mailing Address:** 16765 FISH HAWK BOULEVARD LITHIA, FL 33547 FEI Number: 59-3199091 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SESSKIN, ERIC 5104 FAIRWAY ONE DRIVE VALRICO, FL 33594 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSD () Delete Title: () Change () Addition Name: SESSKIN, ERIC Name: 5104 FAIRWAY ONE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33594 City-St-Zip: () Delete Title: Title: () Change (X) Addition Name: Name: BENNER, BILLIE J 2801 STATE RD 60 EAST Address: Address: VALRICO, FL 33594 City-St-Zip: City-St-Zip: () Change (X) Addition Title: () Delete Title: TRF MATHAI, SUNANDA Name: Name: 2801 STATE RD 60 EAST Address Address: City-St-Zip: City-St-Zip: VALRICO, FL 33594 Title: () Delete Title: CEO () Change (X) Addition ERIC, SESSKIN Name: Name: Address: Address: 5104 FAIR WAY ONE DRIVE City-St-Zip: City-St-Zip: TAMPA, FL 33594 Title: Title: () Change (X) Addition SEC () Delete BILLIE, BENNER J Name: Name: Address: Address: 2801 STATE RD 60 EAST City-St-Zip: City-St-Zip: VALRICO, FL 33594 Title: () Delete Title: VPO () Change (X) Addition MATHAI, SUNANDA Name: Name: 2801 STATE RD 60 EAST Address: Address: City-St-Zip: City-St-Zip: VALRICO, FL 33594

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: BILLIE BENNER VP 04/19/2008