2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000025827

Entity Name: ABSOLUTE NATURAL BLENDERS, INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 320 STAN DRIVE SUITE A MELBOURNE, FL 32904 **New Mailing Address: Current Mailing Address:** 320 STAN DRIVE SUITE A MELBOURNE, FL 32904 US FEI Number: 59-3292339 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILT, MEL C 885 ÓAKWOOD AVE MELBOURNE, FL 32940 US 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: D () Delete

Name: WILT, MEL

Address: 320 STAN DRIVE, SUITE A

City-St-Zip: MELBOURNE, FL

Title: D () Delete Name: LANDERS, PATRICIA

Address: 440 STRAP DR

City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition

Name: WILT, MEL

Address: 320 STAN DRIVE, SUITE A City-St-Zip: MELBOURNE, FL 32904 US

Title: D (X) Change () Addition

Name: LANDERS, PATRICIA

Address: 440 STRAP DR

City-St-Zip: MELBOURNE, FL 32904 US

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: MEL C. WILT PRES 04/21/2009