2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000059971

Name:

Address:

City-St-Zip:

Entity Name: GOD BLESS INVESTMENT AND ENTERPRISES INC

FILED May 05, 2009 Secretary of State

•							
Current Principal Place of Business:				New Prin	New Principal Place of Business:		
7150 BISC MIAMI, FL	CAYNE BLVD. 33138						
Current Mailing Address:				New Mailing Address:			
7150 BISC MIAMI, FL	CAYNE BLVD. 33138						
FEI Number	: 65-0527682	FEI Number	Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:		
PATRICK, MARTY ESQ. 1141 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154 US				7150 BISC	PATRICK, MARTY ESQ. 7150 BISCAYNE BLVD. MIAMI, FL 33138 US		
	e named entity e of Florida.	submits this s	tatement for the p	urpose of changing	its register	red office or registered agent, or both,	
SIGNATURE:					05/05/2009		
Electronic Signature of Registered Agent				ent	Date		
	nce with s. 607.19 mpaign Financir		•	t receive the prior noti	ce.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PATEL, HEMA	NE BLVD. THE K	NG MOTEL	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PATEL, JAYW 7150 BISCAYI MIAMI, FL 33	NE BLVD.		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PATEL, DHIRU 7150 BISCAYI MIAMI, FL 33	NE BLVD.		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	() Delete		Title:	D	() Change (X) 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.

Name:

Address:

City-St-Zip:

PATEL, LAXMIBEN D

MIAMI, FL 33138

7150 BISCAYNE BLVD.

SIGNATURE: HEMANT PATEL PRES 05/05/2009