

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000058274

Entity Name: MALE POUCH, INC.

FILED
May 29, 2008
Secretary of State

Current Principal Place of Business:

504 OVERLOOK DR
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

504 OVERLOOK DR
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 65-0665754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCROBERTS, SAMUEL J PCEO
504 OVERLOOK DR
NORTH PALM BEACH, FL 33408 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: MCROBERTS, SAMUEL J
Address: 5040 OVERLOOK DR
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D () Delete
Name: KVARNBERG, LEE
Address: 529 30TH STREET
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: GOLDBLUM, KENNETH
Address: 1013 SW BLUE STEM WAY
City-St-Zip: STUART, FL 34997 US

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: SAMUEL J. MCROBERTS

PCEO

05/29/2008

Electronic Signature of Signing Officer or Director

_____ Date