2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P97000032547

Entity Name: MAYFAIR WET WILLIES, INC.

Current Principal Place of Business:

2911 GRAND AVENUE
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 60127
SAVANNAH, GA 31420

New Mailing Address:

FEI Number: 65-0759306 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: D ( ) Delete
Name: STERN, ROBERT N
Address: 1800 KALURNA CT.
City-St-Zip: ORLANDO, FL 32806

Title: D ( ) Delete
Name: DICKINSON, FRED I
Address: 60 HARVEY AVE.
City-St-Zip: PARAMUS, NJ 07652

Title: D ( ) Delete
Name: DICKINSON, WILLIAM A
Address: 106 DUTCH ISLAND DR.
City-St-Zip: SAVANNAH, GA 31406

Title: D ( ) Delete
Name: STACHEL, ERIC S
Address: 2845 LOOKOUT PL.
City-St-Zip: SAVANNAH, GA 30305

Title: D ( ) Delete
Name: STACHEL, DAVID A
Address: 11 ISLAND AVE., #P.H. 2
City-St-Zip: MIAMI BEACH, FL 33139

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:

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: WILLIAM DICKINSON D 04/30/2009

Electronic Signature of Signing Officer or Director — Date