## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000042769

City-St-Zip: ORLANDO, FL 32853

Entity Name: FNLIGHTMENT WORLDWIDE INC

FILED Feb 06, 2009 Secretary of State

Entity Na	me: ENLIGH	IMENT WORLDWIDE, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
P.O BOX ORLAND(	536008 O, FL 3285360	008		
Current Mailing Address:			New Mailing Address:	
P.O BOX ORLAND(	536008 O, FL 3285360	008		
FEI Number	: 65-0895252	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of (	Current Registered Agent:	Name and Address o	f New Registered Agent:
FAIN, BYRON 7512 DR. PHILLIPS BLVD. SUITE 50-239 ORLANDO, FL 32819 US			FAIN, BYRON 611 N MILLS AVE ORLANDO, FL 32803-	-4637
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATURE:				02/06/2009
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( FAIN, BYRON P.O BOX 5360 ORLANDO, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address:	P ( PERSHING, JO P.O BOX 5360		Title: Name: Address:	( ) Change ( ) Addition

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: BYRON FAIN D 02/06/2009