## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000052697

Entity Name: TITO GAONA'S FLYING FANTASY CIRCUS, INC.

FILED Apr 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
432 SPADA VENICE, F					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
432 SPADA VENICE, F					
FEI Number:	65-0856944	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
GAONA, TI 432 SPADA VENICE, FI	ARO DR	JS			
The above in the State		submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Carr	npaign Financir	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDST ( GAONA, TITO 432 SPADARO VENCE, FL 3-		Title: Name: Address: City-St-Zip:	( ) Change ( ) 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.

SIGNATURE: VICTOR GAONA OWNE 04/19/2009