2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000056825

Entity Name: CORPORATE CAB, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 AVIATION DRIVE SOUTH SUITE 103 NAPLES, FL 341043568 US

Current Mailing Address: New Mailing Address:

100 AVIATION DRIVE SOUTH SUITE 103 NAPLES, FL 341043568 US

FEI Number: 59-3586198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRAHAM, C C PRESIDE 8075 TIGER COVE UNIT 1707 NAPLES, FL 341131617 US GRAHAM, C C PRESIDE 518 ST. ANDREWS BLVD. NAPLES, FL 341138910 US

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: C.C. GRAHAM 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRFS () Delete Title: PRFS (X) Change () Addition GRAHAM, C. C PRESIDE GRAHAM, C. C PRESIDE Name: Name: 518 ST. ANDREWS BLVD. 8075 TIGER COVE #1707 Address: Address: City-St-Zip: NAPLES, FL 341131617 US City-St-Zip: NAPLES, FL 341138910 US

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: C.C. GRAHAM PRES 04/30/2009