

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S51835

FILED
Oct 21, 2009
Secretary of State

Entity Name: FANTASI INTERNATIONAL CORP.

Current Principal Place of Business:

860 WEST 84TH STREET
HIALEAH, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

860 WEST 84TH STREET
HIALEAH, FL 33014 US

New Mailing Address:

FEI Number: 65-0260312

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIA CONSUELO ERICKSON
860 W 84TH ST
HIALEAH, FL 33014 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

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: ERICKSON, MARIA C
Address: 860 WEST 84TH STREET
City-St-Zip: HIALEAH, FL 33014

Title: VP (X) Delete
Name: KAPLAN, LAWRENCE
Address: 860 WEST 84TH STREET
City-St-Zip: HIALEAH, FL 33014

Title: T () Delete
Name: RUSSELL, BRUCE
Address: 860 WEST 84TH STREET
City-St-Zip: HIALEAH, F 33014

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: MARIA ERICKSON

PS

10/21/2009

Electronic Signature of Signing Officer or Director

Date