
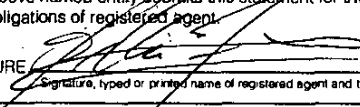
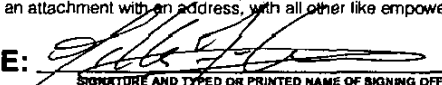


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2008 8:00 am
Secretary of State

06-25-2008 90009 017 ***150.00

DOCUMENT # V31365 1. Entity Name CANESSE, INC.					
Principal Place of Business 1501 LAUREL ST. SUITE 103 SARASOTA, FL 34236 US			Mailing Address 1501 LAUREL ST. SUITE 103 SARASOTA, FL 34236 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 3155 233rd St. E.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Myakka, FL		4. FEI Number 65-0332288	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 34251		Country Manatee		Applied For Not Applicable	
6. Name and Address of Current Registered Agent CANESSE, GILLES 1501 LAUREL ST #103 SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 3155 233rd St. E. City Myakka FL Zip Code 34251	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		Gilles Canesse, president		6-20-08 DATE	
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANESSE, GILLES 1501 LAUREL ST. #103 SARASOTA, FL 34236	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANESSE, FREDDY 4433 MCINTOSH PK RD # 507 SARASOTA, FL	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Gilles Canesse, pres.		6-20-08 941-322-0458 Date Daytime Phone #	

ATTACHMENT

40109084
V31365

TO: State of Florida
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

FM: Gilles Canesse, president
Canesse, Incorporated
3155 233rd St. E.
Myakka, FL 34251

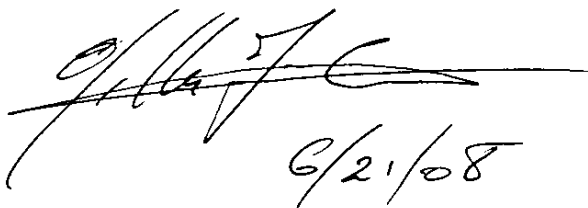
RE: 65-0332288
Annual Report 2008

Enclosed is a reissued form and check #1390 in the amount of \$150 for the 2008 annual report for Canesse, Incorporated. Our check #1313 was sent to the state of Florida the end of April. Our bank statement arrived yesterday, and in doing the bank reconciliation, we noticed our check to the state has not cleared. In light of this, we called your offices first thing this morning and inquired as to the status of our check and our report.

We learned that the check had been received by the state, but was sent back to us on May 6th with a request for the proper form. We had sent the check with the form which we received by the state which we understand now was not the right form. We have today printed the correct form from your website and are reissuing a new check and resubmitting the proper form to file the 2008 annual report. We will be voiding the first check which has apparently been lost.

We respectfully request your consideration of the timely submission of our check prior to the due date with our annual report on the form we had from the state, and our replacement check and new form from the website submitted as soon as we became aware through our bank statement that the original payment had not been processed. If our original check makes its way back to you, please keep this note in our file, so that the processors there can understand why two checks have been issued, and why this check on this date is for \$150. Please return the original check to us if you do get it back.

Thank you for your help this year with our annual report filing.



6/21/08