

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V42491

Entity Name: AMBER MARIE INC.

FILED
Sep 17, 2008
Secretary of State

Current Principal Place of Business:

934 N 31 RD
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

6525 COUNTY ROAD 248
OBRIEN, FL 32071 US

Current Mailing Address:

934 N 31 RD
HOLLYWOOD, FL 33021 US

New Mailing Address:

6525 COUNTY ROAD 248
OBRIEN, FL 32071 US

FEI Number: 65-0346477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EADIE, KAREN D
934 N 31RD
HOLLYWOOD, FL 33020 US

Name and Address of New Registered Agent:

EADIE, KAREN D
6525 COUNTY ROAD 248
OBRIEN, FL 32071 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: KAREN D. EADIE

09/17/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTSD () Delete
Name: EADIE, KAREN
Address: 934 N. 31 RD
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: EADIE, KAREN
Address: 6525 COUNTY ROAD 248
City-St-Zip: OBRIEN, FL 32071

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: KAREN D. EADIE

PTSD

09/17/2008

Electronic Signature of Signing Officer or Director

Date