

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G78178

Entity Name: FILINGS, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

3732 N.W. 16TH ST.
FT. LAUDERDALE, FL 333114132

New Principal Place of Business:

Current Mailing Address:

3732 N.W. 16TH ST.
FT. LAUDERDALE, FL 333114132

New Mailing Address:

FEI Number: 59-2517007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEYMAN, L
3732 N.W. 16TH ST.
FT. LAUDERDALE, FL 33311 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HEYMAN, LESLIE
Address: 3732 N.W. 16TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: V () Delete
Name: HAYDEN, ROBERT
Address: 3732 NW 16TH ST.
City-St-Zip: FL. LAUDERDALE, FL 33311

Title: VP/D () Delete
Name: HEYMAN, BONNIE
Address: 3732 NW 16TH ST
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VP () Delete
Name: ROMAN, TERESA
Address: 3732 NW 16TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33311

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:

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: LESLIE HEYMAN

DP

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date