

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L40402

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: THE CLOSET DOCTOR OF SOUTH FLORIDA, INC.

## Current Principal Place of Business:

5100 NW 15 STREET  
STE A  
MARGATE, FL 33063 US

## New Principal Place of Business:

10238 NW 63 DRIVE  
PARKLAND, FL 33076 US

## Current Mailing Address:

5100 NW 15 STREET  
STE A  
MARGATE, FL 33063 US

## New Mailing Address:

10238 NW 63 DRIVE  
PARKLAND, FL 33076 US

FEI Number: 65-0162327

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COHEN, GLENDA  
10238 NW 63 DRIVE  
PARKLAND, FL 33076 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: P ( ) Delete  
Name: COHEN, GLENDA,  
Address: 10238 NW 63 DRIVE  
City-St-Zip: PARKLAND, FL 33076

Title: V ( ) Delete  
Name: COHEN, WILLIAM,  
Address: 10238 NW 63 DRIVE  
City-St-Zip: PARKLAND, FL 33076

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GLENDA COHEN

PRES

04/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date