2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000117144

City-St-Zip:

HIALEAH, FL 33014

FILED Apr 08, 2009 Secretary of State

Entity Nar	me: BIRD CAGE WHOLESALERS INC.			
Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:	
2944 W 77 HIALEAH,		2944 W 77 STREET HIALEAH, FL 33016	US	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
2944 W 77 HIALEAH,		7947 WEST 15TH AVE HIALEAH, FL 33014	US	
FEI Number:	: 30-0213263 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
DESCALZO-PEREZ, ANA M MS 7947 WEST 15 AVENUE HIALEAH, FL, FL 33014 US			DESCALZO-PEREZ, ANA M MS 7947 WEST 15 AVENUE HIALEAH,, FL 33014 US	
	named entity submits this statement for the e of Florida.	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:			04/08/2009	
	Electronic Signature of Registered A	gent	Date	
Election Can	npaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete PEREZ, MONICA N 7947 WEST 15 AVENUE HIALEAH, FL 33014	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () Delete PEREZ, RODOLFO P 7947 WEST 15 AVENUE HIALEAH, FL 33014	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	SECR () Delete DESCALZO-PEREZ, ANA M 7947 WEST 15 AVENUE	Title: (Name: Address:) Change () Addition	

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.

City-St-Zip:

SIGNATURE: ANA M. DESCALZO-PEREZ **SECR** 04/08/2009