

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000127544

1. Entity Name  
THREE PIECES, INC.



**FILED**  
**Apr 28, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business  
2903 CURTIS AVE. SOUTH  
LEHIGH ACRES, FL

Mailing Address  
2903 CURTIS AVE. SOUTH  
LEHIGH ACRES, FL



02192008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-5687068 Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
  
MYLES, MICHAEL  
2903 CURTIS AVE. SOUTH  
LEHIGH ACRES, FL

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MYLES, MICHAEL 2903 CURTIS AVE. SOUTH LEHIGH ACRES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GASKINS, JACQUELINE 1249 NW 51ST ST. MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COOPER, ANGILA 1249 NW 51ST ST. MIAMI, FL 33142
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

00000928647  
05/21/08 150036-007 \$150.00

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: Michael D Myles Date: 4-10-08 Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR