

2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
May 14, 2009
Secretary of State**

DOCUMENT# P08691

Entity Name: COLMAN & HIRSCHMANN INC.

Current Principal Place of Business:

17 BARSTOW RD
STE 305
GREAT NECK, NY 11021 US

New Principal Place of Business:

Current Mailing Address:

17 BARSTOW RD
STE 305
GREAT NECK, NY 11021 US

New Mailing Address:

FEI Number: 13-5631245 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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

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: PST () Delete
Name: HIRSCHMANN, HOWARD /ASST
Address: 14 RIDGE DR. E.
City-St-Zip: GREAT NECK, NY

Title: D () Delete
Name: HIRSCHMANN, HOWARD
Address: 14 RIDGE DR. E.
City-St-Zip: GREAT NECK, NY

Title: VSD () Delete
Name: HIMES, RAYMOND
Address: 1758 SABAL PALM DR
City-St-Zip: BOCA RATON, FL

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:

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: HOWARD HIRSCHMANN

D

05/14/2009

Electronic Signature of Signing Officer or Director

_____ Date