

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005229

Entity Name: BRAMSON HOUSE, INC.

FILED
Jan 14, 2008
Secretary of State

Current Principal Place of Business:

151 ALBANY AVENUE
FREEPORT, NY 11520

New Principal Place of Business:

Current Mailing Address:

151 ALBANY AVENUE
FREEPORT, NY 11520

New Mailing Address:

FEI Number: 11-2338683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOCHBERG, ROBERT N
606 N OLIVE AVE
WEST PALM BEACH, FL 33401 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: OD () Delete
Name: ABRAMSON, ELLIS
Address: 3041 WYNSUM
City-St-Zip: MERRRICK, NY

Title: TD () Delete
Name: ABRAMSON, BETTY
Address: 12 VOORHIS AVE.
City-St-Zip: ROCKVILLE CENTRE, NY

Title: CD () Delete
Name: ABRAMSON, JULES
Address: 12 VOORHIS AVE.
City-St-Zip: ROCKVILLE CENTRE, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OD (X) Change () Addition
Name: ABRAMSON, ELLIS
Address: 3080 WYNSUM AVE
City-St-Zip: MERRRICK, NY 11566 US

Title: TD (X) Change () Addition
Name: ABRAMSON, BETTY
Address: 12 VOORHIS AVE.
City-St-Zip: ROCKVILLE CENTRE, NY 11570 US

Title: CD (X) Change () Addition
Name: ABRAMSON, JULES
Address: 12 VOORHIS AVE.
City-St-Zip: ROCKVILLE CENTRE, NY 11570 US

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: PATRICIA ABRAMSON

MGR

01/14/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date