

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000059723

**Entity Name:** STORE APPLIANCES CORP.

**Current Principal Place of Business:**

244 WEST 21 ST  
HIALEAH, FL 33010

**Current Mailing Address:**

244 WEST 21 ST  
HIALEAH, FL 33010 US

**FEI Number: 45-1610062**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PADRON, NOLBERTO  
244 WEST 21 ST  
HIALEAH, FL 33010 US

*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

**Officer/Director Detail :**

Title	P	Title	V-P
Name	PADRON, NOLBERTO	Name	PADRON, DORA L
Address	244 WEST 21 ST	Address	244 W 21 ST
City-State-Zip:	HIALEAH FL 33010	City-State-Zip:	HIALEAH FL 33010

*I hereby 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 all other like empowered.*

**SIGNATURE: NOLBERTO PADRON**

**PRESIDENT**

**04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date