

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 219722

Entity Name: ALL-BRITE SALES COMPANY

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

P.O. BOX 3359
2204 HAINES STREET
JACKSONVILLE, FL 32206 US

New Principal Place of Business:

2204 HAINES STREET
JACKSONVILLE, FL 32206 US

Current Mailing Address:

P.O. BOX 3359
2204 HAINES STREET
JACKSONVILLE, FL 322060360 US

New Mailing Address:

P.O. BOX 3359
JACKSONVILLE, FL 322060360 US

FEI Number: 59-0863850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LA BARBERA, RANDY J.
2204 HAINES STREET
P.O. BOX 3359
JACKSONVILLE, FL 32206 US

Name and Address of New Registered Agent:

LA BARBERA, RANDY J.
2204 HAINES STREET
JACKSONVILLE, FL 32206 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: RANDY J. LABARBERA

02/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CFO () Delete
Name: LA BARBERA, RANDY J.,
Address: 2204 HAINES STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: P () Delete
Name: LA BARBERA, MARTIN J
Address: 2204 HAINES ST
City-St-Zip: JACKSONVILLE, FL

Title: S () Delete
Name: LA BARBERA, BETTY M
Address: 2204 HAINES ST
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change () Addition
Name: LA BARBERA, RANDY J.,
Address: 2204 HAINES STREET
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: P (X) Change () Addition
Name: LA BARBERA, MARTIN J
Address: 2204 HAINES ST
City-St-Zip: JACKSONVILLE, FL 32206 US

Title: S (X) Change () Addition
Name: LA BARBERA, BETTY M
Address: 2204 HAINES ST
City-St-Zip: JACKSONVILLE, FL 32206 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: RANDY J. LABARBERA

CFO

02/17/2009

Electronic Signature of Signing Officer or Director

Date