## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 250433** 

Entity Name: CORONA BRUSHES, INC.

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5065 SAVARESE CIRCLE 5065 SAVARESE CIRCLE TAMPA, FL 33634 US

Current Mailing Address: New Mailing Address:

5065 SAVARESE CIRCLE 5065 SAVARESE CIRCLE TAMPA, FL 33634 US

FEI Number: 59-0942496 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WAKSMAN, GREGORY
7015 PELICAN ISLAND DRIVE
TAMPA, FL 33625 US
WAKSMAN, GREGORY
7015 PELICAN ISLAND DRIVE
TAMPA, FL 33634 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: 01/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition
Name: WAKSMAN, GREGORY,
Address: 7015 PELICAN ISLAND DR

 Address:
 7015 PELICAN ISLAND DR
 Address:
 7015 PELICAN ISLAND DR

 City-St-Zip:
 TAMPA, FL
 City-St-Zip:
 TAMPA, FL
 33634 US

Title: V ( ) Delete Title: V (X) Change ( ) Addition Name: WAKSMAN, BENJAMIN. Name: WAKSMAN, BENJAMIN.

Address: 607 PENN NATIONAL City-St-Zip: SEFFNER, FL S3584 US

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 WAKSMAN, ALBERT
 Name:
 WAKSMAN, ALBERT

 Address:
 4132 CAUSEWAY VISTA DR
 Address:
 4132 CAUSEWAY VISTA DR

 City-St-Zip:
 TAMPA, FL 33615
 City-St-Zip:
 TAMPA, FL 33615 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: ALBERT WAKSMAN VP 01/16/2009