

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 642869

FILED
Aug 19, 2009
Secretary of State**Entity Name:** BARTSOCAS BROS., INC.**Current Principal Place of Business:**410 E HALLANDALE BCH BLVD
STE 200
HALLANDALE BEACH, FL 33009 US**Current Mailing Address:**P.O. BOX 1264
HALLANDALE BEACH, FL 33009 US**New Principal Place of Business:**410 E HALLANDALE
200
HALLANDALE, FL 33009 US**New Mailing Address:****FEI Number:** 59-1941758 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BARTSOCAS, KIKI
410 E. HALLANDALE
SUITE #200
HALLANDALE, FL 33009 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**OFFICERS AND DIRECTORS:****Title:** DP () Delete
Name: BARTSOCAS, GUS
Address: 410 E HALLANDALE BCH BLVD SUITE 200
City-St-Zip: HALLANDALE, FL 33009 US**Title:** DVP () Delete
Name: BARTSOCAS, KIKI
Address: 410 E. HALLANDALE #200
City-St-Zip: HALLANDALE, FL 33009**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DPST (X) Change () Addition
Name: BARTSOCAS, KIKI
Address: 410 E HALLANDALE BCH BLVD SUITE 200
City-St-Zip: HALLANDALE, FL 33009 US**Title:** D (X) Change () Addition
Name: BARTSOCAS, STEVEN
Address: 2321 MARINER COURT
City-St-Zip: DANIA BEACH, FL 33312

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: KIKI BARTSOCAS

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08/19/2009

Electronic Signature of Signing Officer or Director_____
Date