

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 683276

FILED
Apr 21, 2009
Secretary of State

Entity Name: SEVEN FORTY CENTRAL CORP.

Current Principal Place of Business:

740 ALTON RD
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

740 ALTON RD
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 59-2060885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, ANDREW
740 ALTON RD
MIAMI BCH., FL 33139 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: D () Delete
Name: PAPIS MADOV, ALEX
Address: 740 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL

Title: D () Delete
Name: DUBLINSKI, LEIBEL
Address: 740 ALTON RD
City-St-Zip: MIAMI BCH, FL 33139

Title: D () Delete
Name: ZILBERBERG, SEYMON
Address: 740 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL

Title: PD () Delete
Name: SHVARTSMAN, BORIS
Address: 740 ALTON RD.
City-St-Zip: MIAMI BEACH, FL

Title: VPD () Delete
Name: ROTH, ANDREW
Address: 740 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL

Title: DST () Delete
Name: AROCH, HEUDA
Address: 740 ALTON RD
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BORIS SHVARTSMAN

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date