

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000668

Entity Name: THECO INDUSTRIES INC.

FILED
Jun 29, 2009
Secretary of State

Current Principal Place of Business:

2817 NE 14TH AVENUE
WILTON MANORS, FL 33334

New Principal Place of Business:

Current Mailing Address:

2817 NE 14TH AVENUE
WILTON MANORS, FL 33334

New Mailing Address:

FEI Number: 20-0513555 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THORNTON, IIAN
2817 NE 14TH AVENUE
WILTON MANORS, FL 33334 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THORNTON, I
Address: 2817 NE 14TH AVENUE
City-St-Zip: WILTON MANORS, FL 33334

Title: VSTD () Delete
Name: THORNTON, M
Address: 2817 NE 14TH AVENUE
City-St-Zip: WILTON MANORS, FL 33334

Title: D () Delete
Name: THORNTON, D
Address: 500 BONTONA AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: D () Delete
Name: WOODWARD, P
Address: 6471 EL CEDRAL STREET
City-St-Zip: LONG BEACH, CA 90815

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:

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: IIAN THORNTON

PD

06/29/2009

Electronic Signature of Signing Officer or Director

Date