## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J37067

Entity Name: ACCESSORIA INC.

FILED Mar 31, 2009 Secretary of State

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

1210 S. DIXIE HIGHWAY CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

1210 S. DIXIE HIGHWAY CORAL GABLES, FL 33146

FEI Number: 59-2736868 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:

BODNER, EDWARD A.

1210 S. DIXIE HIGHWAY

CORAL GABLES, FL 33146 US

BROWN, BRIANNA M

1210 S. DIXIE HIGHWAY

CORAL GABLES, FL 33146 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: BRIANNA M. BROWN 03/31/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition BODNER, EDWARD A., BODNAR, EMMY J Name: Name: 1210 S. DIXIE HIGHWAY 1210 S. DIXIE HIGHWAY Address: Address: City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL

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

 Name:
 BODNER, EMMY,
 Name:
 BROWN, BRIANNA M

 Address:
 1210 S. DIXIE HWY.
 Address:
 1210 S. DIXIE HWY.

 City-St-Zip:
 CORAL GABLES, FL 33146
 City-St-Zip:
 CORAL GABLES, FL 33146

Title: S () Delete Title: T (X) Change () Addition

 Name:
 BODNAR, EDWARD A JR
 Name:
 BODNAR, EDWARD A JR

 Address:
 1210 S DIXIE HWY
 Address:
 1210 S DIXIE HWY

 City-St-Zip:
 CORAL GABLES, FL 33146
 City-St-Zip:
 CORAL GABLES, FL 33146

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

 Name:
 BROWN, BRIANNA
 Name:

 Address:
 1210 S DIXIE HWY
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33146
 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: BRIANNA M. BROWN DV 03/31/2009