

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J43617

Entity Name: 5400 N. DIXIE, INC.

FILED
Mar 05, 2009
Secretary of State

Current Principal Place of Business:

630 MARINERS WAY
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1392
BOYNTON BEACH, FL 33425 US

New Mailing Address:

FEI Number: 59-2749902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFASO, FRANK
630 MARINERS WAY
BOYNTON BEACH, FL 33435 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: PD () Delete
Name: LOFASO, FRANK
Address: 630 MARINERS WAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: VPD () Delete
Name: ABEEL, LISA L
Address: 3039 BURRLAND LANE
City-St-Zip: THE PLAINS, VA 20198

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FRANK LOFASO

PD

03/05/2009

Electronic Signature of Signing Officer or Director

Date