

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J71074

FILED  
Jan 15, 2009  
Secretary of State

Entity Name: PINELLAS WALLPAPER MART, INC.

**Current Principal Place of Business:**

530 PINELLAS AVENUE SOUTH  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

**Current Mailing Address:**

1122 LANCER LANE  
TARPON SPRINGS, FL 346892950

**New Mailing Address:**

530 PINELLAS AVENUE SOUTH  
TARPON SPRINGS, FL 34689 US

FEI Number: 59-2804356

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOANOW, ALEXANDER M  
1163 BAYOU DRIVE  
TARPON SPRINGS, FL 34689 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: JOANOW, SYLVIA  
Address: 1122 LANCER LANE  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: P ( ) Delete  
Name: JOANOW, ALEXANDER M  
Address: 1163 BAYOU DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

**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: SYLVIA JOANOW

D

01/15/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date