## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K28820

Entity Name: A WIZARD LOCKSMITH, INC.

**FILED** Mar 06, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
- a	paiacc ci _aciiicco

15389 69TH TR N 902 NORTHLAKE BOULEVARD

PALM BEACH GARDENS, FL 33418 US NORTH PALM BEACH, FL 33408 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 220717 6697 PALERMO WAY

WEST PALM BEACH, FL 334220717 US LAKE WORTH, FL 33467 US

FEI Number: 65-0105073 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:

AIKEN, AVON J JR GEORGE D. PSOINOS, P.A. 15389 69TH TERRACE NORTH 1655 PALM BEACH LAKES BOULEVARD

PALM BEACH GARDENS, FL 33418 US SUITE 106 WEST PALM BEACH, FL 33401 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: GEORGE D. PSOINOS, ESQ., PRESIDENT 03/06/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete (X) Change ( ) Addition AIKEN, AVON J JR ADLER, FRED Name: Name:

15389 69TH TERRACE NORTH 6697 PALERMO WAY Address: Address: City-St-Zip: PALM BCH GDS, FL City-St-Zip: LAKE WORTH, FL 33467 US

**VPD** Title: VΡ Title: () Delete (X) Change ( ) Addition

AIKEN, KYLA Y Name: Name: ADLER, CARLY 15389 N 69 TERR 6697 PALERMO WAY Address: Address: PALM BEACH GARDENS, FL LAKE WORTH, FL 33467 US City-St-Zip: City-St-Zip:

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

Name: ADLER, CINDI Name: 6697 PALERMO WAY Address Address: City-St-Zip: City-St-Zip: LAKE WORTH, FL 33467 US

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.

Ρ SIGNATURE: FRED ADLER 03/06/2008