

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 23, 2008 8:00 am**  
**Secretary of State**

06-23-2008 90003 001 \*\*\*150.00

DOCUMENT # P00000078983

1. Entity Name  
CLOSETS BY US CORPORATION



Principal Place of Business Mailing Address  
~~8201 NW 8TH PLACE~~ ~~8201 NW 8TH PLACE~~  
~~PLANTATION, FL 33324~~ ~~PLANTATION, FL 33324~~

40108950

2. Principal Place of Business - No P.O. Box # 3. Mailing Address  
5704 Dewey ST 5704 Dewey ST  
Suite, Apt. #, etc. Suite, Apt. #, etc.



06202008 Chg-P CR2E034 (12/06)

City & State City & State  
Hollywood, FL Hollywood, Fla.  
Zip Country Zip Country  
33023 USA 33023 USA

4. FEI Number Applied For  
65-1033208 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VALERIO, FRANKLIN  
8201 NW 8TH PLACE  
PLANTATION, FL 33324

Name  
Street Address (P.O. Box Number is Not Acceptable)  
5704 Dewey Street  
City Hollywood FL Zip Code 33023

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Franklin A. Valerio*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

6/19/08

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD  
NAME VALERIO, FRANKLIN ☐ Delete  
STREET ADDRESS ~~8201 NW 8TH PLACE~~  
CITY - ST - ZIP ~~PLANTATION, FL 33324~~

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 5704 Dewey Street  
CITY - ST - ZIP Hollywood, Fla. 33023

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
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TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Franklin A. Valerio*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/19/08