

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000004848

FILED
Apr 14, 2009
Secretary of State

Entity Name: THE HOLE KIT & CABOODLE, INC.

Current Principal Place of Business:

1660 S. BAYSHORE CT.
#101
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

MERMELSTEIN, 3211 PONCE DE LEON
SUITE 305
CORAL GABLES, FL 33133 US

New Mailing Address:

MERMELSTEIN, 3211 PONCE DE LEON
SUITE 305
CORAL GABLES, FL 33134 US

FEI Number: 65-1069759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERMELSTEIN, MICHAEL
3211 PONCE DE LEON BLVD
SUITE 305
CORAL GABLES, FL 33134 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: P () Delete
Name: O GRADY, DANIEL W
Address: 1660 S. BAYSHORE CT. #101
City-St-Zip: MIAMI, FL 33133 US

Title: VP () Delete
Name: BRANSTEHER, VIC
Address: 101 OCEAN AVE UNIT 702D
City-St-Zip: SANTA MONICA, CA 90402

Title: S () Delete
Name: O GRADY, MONETTE K
Address: 1660 S. BAYSHORE CT. #101
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: O GRADY, DANIEL W
Address: 1660 S. BAYSHORE CT. #101
City-St-Zip: MIAMI, FL 33133 US

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: DANIEL W. O'GRADY

PST

04/14/2009

Electronic Signature of Signing Officer or Director

Date