

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000028811

Entity Name: THE CLOSEOUT CLUB, INC.

FILED  
Feb 19, 2008  
Secretary of State

## Current Principal Place of Business:

20324 NE 16 PLACE  
MIAMI, FL 33179

## New Principal Place of Business:

20725 NE 16TH AVENUE  
A-25  
MIAMI, FL 33179

## Current Mailing Address:

20324 NE 16 PLACE  
MIAMI, FL 33179

## New Mailing Address:

20725 NE 16TH AVENUE  
A-25  
MIAMI, FL 33179

FEI Number: 56-2328526

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEZMY, MYRIAM  
20324 NE 16 PLACE  
MIAMI, FL 33179 US

## Name and Address of New Registered Agent:

LEZMY, MYRIAM  
20725 NE 16TH AVENUE  
A-25  
MIAMI, FL 33179 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: MYRIAM LEZMY

02/19/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LEZMY, MYRIAM  
Address: 20324 NE 16 PLACE  
City-St-Zip: MIAMI, FL 33179

Title: V ( ) Delete  
Name: LEZMY, DEBBIE  
Address: 20324 NE 16 PLACE  
City-St-Zip: MIAMI, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LEZMY, MYRIAM  
Address: 20725 NE 16TH AVENUE # A-25  
City-St-Zip: MIAMI, FL 33179

Title: V (X) Change ( ) Addition  
Name: LEZMY, DEBBIE  
Address: 20725 NE 16TH AVENUE # A-25  
City-St-Zip: MIAMI, FL 33179

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: MYRIAM LEZMY

PD

02/19/2008

Electronic Signature of Signing Officer or Director

Date