

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000082456

Entity Name: ALL BIRD SUPPLY, INC.

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

7011 NW 87 AVENUE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

% SOUTH BROWARD ACCTNG SVC
5599 S UNIVERSITY DRIVE ~ STE 306
DAVIE, FL 33328

New Mailing Address:

SOUTH BROWARD ACCTNG SVC
5599 S UNIVERSITY DRIVE ~ STE 306
DAVIE, FL 33328

FEI Number: 20-0118493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEDIAK, MIRTA
5599 S UNIVERSITY DRIVE ~ STE 306
DAVIE, FL 33328 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: FEUERHERM, WAYNE
Address: 15703 SW 16 STREET
City-St-Zip: DAVIE, FL 33326

Title: D () Delete
Name: CHEDIAK, GILBERT A
Address: 16317 NW 11 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

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: WAYNE FEUERHERM

D

02/05/2009

Electronic Signature of Signing Officer or Director

Date