

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000004254

FILED
Apr 29, 2009
Secretary of State

Entity Name: PROTRIM ENTERPRISES, INC.

Current Principal Place of Business:

1501 NW 47TH AVENUE
SUITE B
LAUDERHILL, FL 33313

New Principal Place of Business:

7725 TAM OSHANTER BLVD
NORTH LAUDERDALE, FL 33068

Current Mailing Address:

1501 NW 47TH AVENUE
SUITE B
LAUDERHILL, FL 33313

New Mailing Address:

7725 TAM OSHANTER BLVD
NORTH LAUDERDALE, FL 33068

FEI Number: 33-1109859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TONY KOWLESSAR & ASSOCIATES
1501 NW 47TH AVENUE
SUITE B
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

TONY KOWLESSAR & ASSOCIATES
7725 TAM OSHANTER BLVD
NORTH LAUDERDALE, FL 33068 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: ANTONY C. KOWLESSAR

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ERKOVAN, GOKHAN
Address: 421 S. LAFAYETTE PARK PLACE, SUITE 330
City-St-Zip: LOS ANGELES, CA 90057 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GOKHAN ERKOVAN

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date