

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041770

Entity Name: THREE ALARM SUBS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1867 INDIAN RIVER DRIVE
ORANGE PARK, FL 32003 US

New Principal Place of Business:

1615 HIGHLAND VIEW CT
ORANGE PARK, FL 32003 US

Current Mailing Address:

1867 INDIAN RIVER DRIVE
ORANGE PARK, FL 32003 US

New Mailing Address:

560 HWY 17 N
NORTH MYRTLE BEACH, SC 29582 US

FEI Number: 20-4576438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PAQUIN, MARY
1867 INDIAN RIVER DR
ORANGE PARK, FL 32003 US

Name and Address of New Registered Agent:

PAQUIN, MARY
1615 HIGHLAND VIEW CT
ORANGE PARK, FL 32003 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: MARY PAQUIN

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PAQUIN, BRYAN J SR.
Address: 1867 INDIAN RIVER DRIVE
City-St-Zip: ORANGE PARK, FL 32003 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PAQUIN, BRYAN J SR.
Address: 1615 HIGHLAND VIEW CT
City-St-Zip: ORANGE PARK, FL 32003 US

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: BRYAN PAQUIN

MGR

04/29/2009

Electronic Signature of Signing Officer or Director

Date