2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000141474

Address:

City-St-Zip:

5010 SW 19TH ST

HOLLYWOOD, FL 33023

Entity Name: TRUE LIBERTY CONCEPTS, INC.

FILED Jun 09, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place	New Principal Place of Business:	
5728 WILEY STREET HOLLYWOOD, FL 33023				2631 SW 55TH AVENUE WEST PARK, FL 33023	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
5728 WILEY STREET HOLLYWOOD, FL 33023				2631 SW 55TH AVENUE WEST PARK, FL 33023	
FEI Number	: 20-5855307	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
HOLLYW	EY STREET DOD, FL 33023		ournose of changing its registere	d office or registered agent, or both,	
	e of Florida.	ubilitis tilis statement for the p	purpose of changing its registere	d office of registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SEARS, BREND 5728 WILEY ST HOLLYWOOD, F	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () HOWARD, WAL 5728 WILEY ST HOLLYWOOD, F	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S () LAURENT, MICH	Delete IELLE A	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: WALTER HOWARD V 06/09/2009