

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000032138

FILED
Feb 02, 2009
Secretary of State

Entity Name: ABC PAWN COIN AND JEWELRY CORP.

Current Principal Place of Business:

3697 S SUNCOAST BLVD
HOMOSASSA, FL 34448

New Principal Place of Business:

Current Mailing Address:

3697 S SUNCOAST BLVD
HOMOSASSA, FL 34448

New Mailing Address:

3756 US HIGHWAY 19
NEW PORT RICHEY, FL 34652

FEI Number: 26-0355574

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRICANO, SALVATORE J
18649 WHITE PINE CIRCLE
HUDSON, FL 34467 US

Name and Address of New Registered Agent:

FRICANO, SALVATORE J
228 ARBOR DRIVE WEST
PALM HARBOR, FL 34683 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: SALVATORE J, FRICANO

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRICANO, SALVATORE J
Address: 18649 WHITE PINE CIRCLE
City-St-Zip: HUDSON, FL 34467

Title: V () Delete
Name: FRICANO, JOSEPH B
Address: 18649 WHITE PINE CIRCLE
City-St-Zip: HUDSON, FL 34467

Title: T () Delete
Name: FRICANO, SALVATORE J
Address: 18649 WHITE PINE CIRCLE
City-St-Zip: HUDSON, FL 34467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: FRICANO, SALVATORE J
Address: 228 ARBOR DRIVE WEST
City-St-Zip: PALM HARBOR, FL 34683

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: SALVATORE J. FRICANO

T

02/02/2009

Electronic Signature of Signing Officer or Director

Date