

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000047804

Entity Name: PENNY LANE STORES TWO, INC

FILED
Jun 04, 2009
Secretary of State

Current Principal Place of Business:

3117 COMMODORE PLAZA
COCONUT GROVE, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3117 COMMODORE PLAZA
COCONUT GROVE, FL 33133 US

New Mailing Address:

FEI Number: 20-8873236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.
5125 ADANSON ST
SUITE 500
ORLANDO, FL 32804 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAVIGNE, ELLYN
Address: 3115 COMMODORE PLAZA
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VTD () Delete
Name: LAVIGNE, JENNIFER
Address: 3115 COMMODORE PLAZA
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAVIGNE, ELLYN A
Address: 3115 COMMODORE PLAZA
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: VTD (X) Change () Addition
Name: LAVIGNE, JENNIFER A
Address: 3115 COMMODORE PLAZA
City-St-Zip: COCONUT GROVE, FL 33133 US

Title: OWN () Change (X) Addition
Name: JOHNNY, KHABBAZ
Address: 3117 COMMODORE PLAZA
City-St-Zip: COCONUT GROVE, FL 33133 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: JENNIFER LAVIGNE

VP

06/04/2009

Electronic Signature of Signing Officer or Director

Date