

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000100624

FILED
Feb 27, 2009
Secretary of State

Entity Name: PALLEN CUSTOM UPHOLSTERY, INC.

Current Principal Place of Business:

11224 FLOWER AVE
BROOKSVILLE, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

11224 FLOWER AVE
BROOKSVILLE, FL 34613 US

New Mailing Address:

FEI Number: 26-3699970

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:

ALLEN, PATRICIA
11224 FLOWER AVENUE
BROOKSVILLE, FL 34613 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: PATRICIA ALLEN

02/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: ALLEN, PATRICIA
Address: 11224 FLOWER AVE
City-St-Zip: BROOKSVILLE, FL 34613 US

Title: D () Delete
Name: ALLEN, PATRICIA
Address: 11224 FLOWER AVE
City-St-Zip: BROOKSVILLE, FL 34613 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: PATRICIA ALLEN

PVST

02/27/2009

Electronic Signature of Signing Officer or Director

Date