

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000101130

FILED
Apr 08, 2012
Secretary of State

Entity Name: PORK CHOP AIRBRUSH INC.

Current Principal Place of Business:

3229 OLEANDER.DR
FORT PIERCE, FL 34942 US

New Principal Place of Business:

3229 OLEANDER.DR
FORT PIERCE, FL 34982 US

Current Mailing Address:

3229 OLEANDER.DR
FORT PIERCE, FL 34942 US

New Mailing Address:

3229 OLEANDER.DR
FORT PIERCE, FL 34982 US

FEI Number: 46-0521297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAREL, DENIS
5015 PALMETTO DR.
FORT PIERCE, FL 34982 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: DIR
Name: BEAUCHAMP, FRANCINE
Address: 5015 PALMETTO DR
City-St-Zip: FORT PIERCE, FL 34982 US

Title: PRES
Name: BEAUCHAMP, FRANCINE
Address: 5015 PALMETTO DR
City-St-Zip: FORT PIERCE, FL 34982 US

Title: DIR
Name: HAREL, DENIS
Address: 5015 PALMETTO DR
City-St-Zip: FORT PIERCE, FL 34982 US

Title: VP
Name: HAREL, DENIS
Address: 5015 PALMETTO DR
City-St-Zip: FORT PIERCE, FL 34982 US

Title: TRES
Name: LEVESQUE, MAURICE
Address: 2050 OLEANDER BLVD BLDG. 11 SUITE 106
City-St-Zip: FORT PIERCE, FL 34950 US

I hereby 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 all other like empowered.

SIGNATURE: DENIS HAREL

VP

04/08/2012

Electronic Signature of Signing Officer or Director

Date