

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000096617

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** SUPLIES CORP

**Current Principal Place of Business:**

627 ANDERSON CIRCLE  
211  
DEERFIELD BEACH, FL 33441US

**New Principal Place of Business:**

705 MERMAID DR  
308  
DEERFIELD BEACH, FL 33441 US

**Current Mailing Address:**

627 ANDERSON CIRCLE  
211  
DEERFIELD BEACH, FL 33441US

**New Mailing Address:**

705 MERMAID DR  
308  
DEERFIELD BEACH, FL 33441US

**FEI Number:** 27-1392146

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOMES, RAFAEL  
627 ANDERSON CIRCLE  
211  
DEERFIELD BEACH, FL 33441 US

**Name and Address of New Registered Agent:**

GOMES, RAFAEL  
705 MERMAID DR  
308  
DEERFIELD BEACH, FL 33441 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:** RAFAEL GOMES

04/10/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** GOMES, RAFAEL  
**Address:** 705 MERMAID DR 308  
**City-St-Zip:** DEERFIELD BEACH, FL 33441 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:** RAFAEL GOMES

P

04/10/2010

Electronic Signature of Signing Officer or Director

Date