

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38242

Entity Name: UNITED ABRASIVES, INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

ROUTE 66, P. O. BOX 75
WILLIMANTIC, CT 06226

New Principal Place of Business:

Current Mailing Address:

ROUTE 66, P. O. BOX 75
WILLIMANTIC, CT 06226

New Mailing Address:

FEI Number: 13-2656850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARZIALI, ARIS
1340 US HWY ONE
SUITE 120 JUPITER COVE PLAZA
JUPITER, FL 33469 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCT () Delete
Name: MARZIALI, ARIS
Address: 100 BEACH RD., #803
City-St-Zip: TEQUESTA, FL

Title: D () Delete
Name: PEINETTI, LILLIAN
Address: CASELLA POSTALE 1365
City-St-Zip: TORINO, ITALY,

Title: D () Delete
Name: FILIPPI, UGO
Address: CASELLA POSTALE 1365
City-St-Zip: TORINO, ITALY,

Title: P () Delete
Name: MARZIALI, ERIC
Address: ROUTE 66
City-St-Zip: WILLIMANTIC, CT

Title: VP () Delete
Name: PATRELLO, JOSEPH
Address: ROUTE 66
City-St-Zip: WILLIMANTIC, CT

Title: S () Delete
Name: MARZIALI, ARIS
Address: 100 BEACH RD, #803E
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: ERIC MARZIALI

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06/23/2009

Electronic Signature of Signing Officer or Director

Date