

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000003584

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: THRIFT WAREHOUSES, INC.

## Current Principal Place of Business:

C/O MATTHEW WOHL 688 NE 1ST STREET  
DANIA BEACH, FL 33004 US

## New Principal Place of Business:

## Current Mailing Address:

C/O JENNY & MATTHEW WOHL 688 NE 1 STREET  
DANIA BEACH, FL 33004 US

## New Mailing Address:

FEI Number: 65-0387206

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOHL, MATTHEW  
C/O MATTHEW WOHL 688 NE 1ST STREET  
DANIA BEACH, FL 33004 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WOHL, MATTHEW  
Address: C/O MATTHEW WOHL 688 NE 1ST STREET  
City-St-Zip: DANIA BEACH, FL 33004 US

Title: VP ( ) Delete  
Name: POLEVAYA-WOHL, YULIA  
Address: C/O MATTHEW WOHL 688 NE 1ST STREET  
City-St-Zip: DANIA BEACH, FL 33004 US

Title: SEC ( ) Delete  
Name: BUDNER, MORDECAI  
Address: 17682 SEA LAKES DRIVE  
City-St-Zip: BOCA RATON, FL 33498 US

## 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:

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: MATTHEW WOHL

P

03/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date