## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000096082

Entity Name: N.A.S. ODOR CONTROL, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9600 W. SAMPLE ROAD 2015 N.W. 127TH TERRACE #303 CORAL SPRINGS, FL 33071

CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

2015 NW 127 TER 2015 N.W. 127TH TERRACE CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33071

FEI Number: 65-0634344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

COHEN, ELEANOR
9600 W. SAMPLE ROAD
2015 N.W. 127TH TERRACE
#303
CORAL SPRINGS, FL 33065 US
CORAL SPRINGS, FL 33071 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: 04/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: PSD (X) Change ( ) Addition

 Name:
 COHEN, ELEANOR
 Name:
 COHEN, ELEANOR

 Address:
 9600 W. SAMPLE ROAD #303
 Address:
 2015 N.W. 127TH TERRACE

 City-St-Zip:
 CORAL SPEINGS, FL 33065
 City-St-Zip:
 CORAL SPEINGS, FL 33071

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: ELEANOR COHEN PSD 04/16/2009