2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2011
Secretary of State

DOCUMENT# P96000038377

Entity Name: CHIRINO LOCKSMITH, INC.

Current Principal Place of Business:

1570 WEST 43RD PLACE
SUITE #9
HIALEAH, FL 33012

New Principal Place of Business:

1570 WEST 43RD PLACE
SUITE #3
HIALEAH, FL 33012

Current Mailing Address:

1570 WEST 43RD PLACE
SUITE #9
HIALEAH, FL 33012

New Mailing Address:

1570 WEST 43RD PLACE
SUITE #3
HIALEAH, FL 33012

FEI Number: 65-0662021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIRINO, ANTONIO
1570 WEST 43RD PLACE
SUITE #9
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

CHIRINO, ANTONIO
1570 WEST 43RD PLACE
SUITE #3
HIALEAH, FL 33012 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: _____ 02/04/2011

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP
Name: CHIRINO, ANTONIO
Address: 1570 WEST 43RD PLACE, SUITE #3
City-St-Zip: HIALEAH, FL 33012

Title: DVP
Name: CHIRINO, MAYRA
Address: 1570 WEST 43RD PLACE, SUITE #3
City-St-Zip: HIALEAH, FL 33012

Title: DS
Name: CHIRINO, ANTHONY D
Address: 1570 WEST 43RD PLACE, SUITE #3
City-St-Zip: HIALEAH, FL 33012

Title: DT
Name: CHIRINO, RAMCES
Address: 1570 WEST 43RD PLACE, SUITE #3
City-St-Zip: HIALEAH, FL 33012

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: ANTHONY D CHIRINO DS 02/04/2011

Electronic Signature of Signing Officer or Director — Date