

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000082159

Entity Name: TWIN SALES, INC.

FILED
Aug 07, 2008
Secretary of State

Current Principal Place of Business:

1440 JFK CAUSEWAY
SUITE 323
N BAY VILLAGE, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

1440 JFK CAUSEWAY
SUITE 323
N BAY VILLAGE, FL 33141 US

New Mailing Address:

FEI Number: 65-0865358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABIKOFF, HARVEY
1440 JFK CAUSEWAY
#323
N BAY VILLAGE, FL 33141 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: D () Delete
Name: ABIKOFF, HARVEY
Address: 1440 JFK CAUSEWAY
City-St-Zip: N BAY VILLAGE, FL 33141

Title: D () Delete
Name: ABIKOFF, LOWELLA
Address: 1440 JFK CAUSEWAY
City-St-Zip: N BAY VILLAGE, FL 33141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HARVEY ABIKOFF

OWNE

08/07/2008

Electronic Signature of Signing Officer or Director

Date