

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V44549

FILED
Apr 02, 2009
Secretary of State

Entity Name: ACE RUG WORKROOM OF BROWARD, INC.

Current Principal Place of Business:

5045 NE 12TH AVE
FORT LAUDERDALE, FL 33334

New Principal Place of Business:

Current Mailing Address:

5045 NE 12TH AVE
FORT LAUDERDALE, FL 33334

New Mailing Address:

FEI Number: 65-0341825

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIALKOWSKY, FRED
5045 NE 12TH AVE
FORT LAUDERDALE, FL 33334 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: FIALKORWSKY, FRED
Address: 20978 SHADY VISTA LANE
City-St-Zip: BOCA RATON, FL 33428

Title: VP () Delete
Name: FIALKORWSKY, GLORIA
Address: 20978 SHADY VISTA LN
City-St-Zip: BOCA RATON, FL 33428

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: FRED FIALOWSKY

P

04/02/2009

Electronic Signature of Signing Officer or Director

Date