

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000103856

Entity Name: PERFECT DRAWER INC.

Current Principal Place of Business:

C/O SCHEHEREZADE MARLES
1680 SW 139 AVE
DAVIE, FL 33325

Current Mailing Address:

C/O SCHEHEREZADE MARLES
1680 SW 139 AVE
DAVIE, FL 33325 US

FEI Number: 26-3836730

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LICUL, OLIVER
C/O SCHEHEREZADE MARLES
1680 SW 139 AVE
DAVIE, FL 33325 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name MARLES, SCHEHEREZADE
Address C/O SCHEHEREZADE MARLES
1680 SW 139 AVE
City-State-Zip: DAVIE FL 33325

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: SCHEHEREZADE MARLES

PRESIDENT

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date