

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F70482

Entity Name: ADORNOTEX INC.

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

3235 NE 207 TER  
MIAMI, FL 33188 US

## New Principal Place of Business:

3235 NE 207 TER  
MIAMI, FL 33180 US

## Current Mailing Address:

3235 NE 207 TER  
MIAMI, FL 33188 US

## New Mailing Address:

P.O. BOX 800255  
MIAMI, FL 33280 US

FEI Number: 59-2163489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALBERTO, KOHN  
5417 NW 74 AVE  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

ALBERTO, KOHN  
3235 NE 207 TER  
MIAMI, FL 33180 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: ALBERTO KOHN

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: KOHN, ALBERTO,  
Address: 5417 NW 74TH AVE  
City-St-Zip: MIAMI, FL 33166

Title: S ( ) Delete  
Name: KESHEN, NELSON,  
Address: 9130 S DADELAND BLVD, S 1511  
City-St-Zip: MIAMI, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: KOHN, ALBERTO,  
Address: 3235 NE 207 TER  
City-St-Zip: MIAMI, FL 33180

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: ALBERTO KOHN

DPT

03/20/2009

Electronic Signature of Signing Officer or Director

Date