

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000013522

FILED
May 06, 2009
Secretary of State

Entity Name: FARFALLA INTERNATIONAL, INC.

Current Principal Place of Business:

14035 SW 72 AVE
PALMETTO BAY, FL 33158

New Principal Place of Business:

Current Mailing Address:

PO BOX 140999
CORAL GABLES, FL 33114

New Mailing Address:

FEI Number: 65-1088568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAFONTISSE, LOUIS L JR.
3121 COMMODORE PLAZA
SUITE 301
MIAMI, FL 33133 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: PEIL, MARIGAI
Address: PO BOX 140999
City-St-Zip: CORAL GABLES, FL 33114

Title: D () Delete
Name: BOULET, DENIS P
Address: PO BOX 140999
City-St-Zip: CORAL GABLES, FL 33114

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: MARIGAI PEIL

D

05/06/2009

Electronic Signature of Signing Officer or Director

_____ Date