

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000019969

Entity Name: ELLONA INC.

FILED  
Apr 23, 2009  
Secretary of State

**Current Principal Place of Business:**

2125 NE 25TH ST  
WILTON MANORS, FL 33305

**New Principal Place of Business:**

**Current Mailing Address:**

2125 NE 25TH ST  
WILTON MANORS, FL 33305

**New Mailing Address:**

FEI Number: 65-0747207

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEINFELD, ALAN L.  
C/O DUNCAISON & SHEINFELD PA  
2131 HOLLYWOOD BLVD STE 503  
HOLLYWOOD, FL 33020 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: PO ( ) Delete  
Name: GELLONA, ANTONIO  
Address: 2125 NE 25TH ST  
City-St-Zip: WILTON MANORS, FL 33305

Title: VPD ( ) Delete  
Name: HERRERA, FELIPE  
Address: 2125 NE 25TH ST  
City-St-Zip: WILTON MANORS, FL 33305

**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: FELIPE HERRERA

VPD

04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date