## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000068570

Address:

City-St-Zip:

16 RUE DES FLEURS BLANCHES

AGDE, 34 34300 FR

Entity Name: ALPHA ART DECO CORP.

FILED Apr 23, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2236 N CY #505	PRESS BENI	D DR				
	D BEACH, FL	33069	US			
Current Mailing Address:				New Mailing Address:		
PO BOX 3 FT LAUDE	50366 ERDALE, FL 3	33335	US			
FEI Number:	: 65-0942826	FEI Nui	nber Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address o	Name and Address of New Registered Agent:	
#505	THALIE PRESS BENI D BEACH, FL		IS			
	named entity e of Florida.	submits t	his statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signa	ture of Registered Age	ent	Date	
Election Car	mpaign Financir	ng Trust Fu	nd Contribution ( ).			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ABELLAN, MA DOMAINE DE BESSAN, 34	STE PAULE	<b>:</b>	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	S ( ERILL, NATHA	) Delete LIE		Title: Name:	( ) Change ( ) Addition	

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: NATHALIE ERILL S 04/23/2009