

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M44038

Entity Name: CSL HOTELLA, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

9660 E BAY HARBOR DR
BAY HARBOR, FL 33154

New Principal Place of Business:

501 NINETY-SIXTH STREET
BAY HARBOR, FL 33154

Current Mailing Address:

9660 E BAY HARBOR DR
BAY HARBOR, FL 33154

New Mailing Address:

FEI Number: 59-2751303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LABROSSE, MARTIN
501 96TH STREET
BAL HARBOUR, FL 33154 US

Name and Address of New Registered Agent:

LABROSSE, MARTIN
501 NINETY-SIXTH STREET
BAL HARBOUR, FL 33154 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:

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: REIZEN, VERA
Address: 1230 100 STREET
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: VP () Delete
Name: MAYERS, STEVEN
Address: 2220 CALAIS DRIVE, #4
City-St-Zip: MIAMI BEACH, FL 33141

Title: S (X) Delete
Name: ROYSE, GAYNEL
Address: 1075 92 STREET, #205
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: COT (X) Delete
Name: PINK, SAMUEL
Address: 11111 BISCAYNE BLVD, #428
City-St-Zip: MIAMI, FL 33181

Title: P (X) Delete
Name: ROY, WILLIAM
Address: 2801 LUCERNE
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REIZEN, VERA
Address: 1230 100 STREET
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: S (X) Change () Addition
Name: COUCH, INEZ
Address: 1050 NE 131 STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTIN LABROSSE

OF

04/28/2009

Electronic Signature of Signing Officer or Director

Date