## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000001460

FRANCOULON, JACQUES J

724 SW 25TH ROAD

MIAMI, FL 33129

Name:

Address:

City-St-Zip:

FILED Mar 23, 2009 Secretary of State

Entity Name: ADFE FLORIDA INC **Current Principal Place of Business: New Principal Place of Business:** 724 SW 25 TH ROAD MIAMI, FL 33129 **Current Mailing Address: New Mailing Address:** 724 SW 25 TH ROAD MIAMI, FL 33129 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRANCOULON, CLAIRE 724 SW 25TH ROAD MIAMI, FL 33129 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FRANCOULON, CLAIRE Name: Name: Address: 724 SW 25TH ROAD Address: City-St-Zip: MIAMI, FL 33129 US City-St-Zip: Title: Title: ( ) Delete () Change () Addition DE MONTALEMBERT, LAURE Name: Name: Address: 2843 SOUTH BAYSHORE DRIVE, #5F Address: City-St-Zip: MIAMI, FL 33133 US City-St-Zip: Title: () Delete Title: () Change () Addition

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CLAIRE FRANCOULON P 03/23/2009