

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000059824

Entity Name: ARABESQUE OF NAPLES, INC.

FILED
Mar 30, 2009
Secretary of State

Current Principal Place of Business:

350 5TH AVENUE SOUTH #101
NAPLES, FL 34102

New Principal Place of Business:

350 5TH AVENUE SOUTH #101
SUITE 101
NAPLES, FL 34102

Current Mailing Address:

350 5TH AVENUE SOUTH #101
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-1028754 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SASHIN, SHERYL
ARABESQUE
350 FIFTH AVE., S. #101
NAPLES, FL 34102 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: PTD () Delete
Name: SASHIN, SHERYL
Address: 823 RUE DE VILLE
City-St-Zip: NAPLES, FL 34108

Title: VSD () Delete
Name: SASHIN, ALVIN
Address: 823 RUE DE VILLE
City-St-Zip: NAPLES, FL 34108

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: SHERYL SASHIN

PTD

03/30/2009

Electronic Signature of Signing Officer or Director

Date