

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004 8:00 am
Secretary of State

07-01-2004 90003 009 ***150.00

DOCUMENT # P00000099865

1. Entity Name
ALBENA, INC.



Principal Place of Business
**3364 NE 34 STREET
FT LAUDERDALE, FL 33308**

Mailing Address
**3364 NE 34 ST.
FORT LAUDERDALE, FL 33308**

34059505

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
3364 NE 34th St.

Suite, Apt. #, etc.
3364 NE 34th St.

03132003

Chg-P

CR2E034 (10/03)

City & State
Fort Lauderdale FL

City & State
Fort Lauderdale FL

4. FEI Number
65-1050597

Applied For
☐ Not Applicable

Zip **33308** Country **USA**

Zip **33308** Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHRISTOFF, SVETLANA
3364 NE 34 STREET
FT LAUDERDALE, FL 33308**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **CHRISTOFF, SVETLANA**
CITY-ST-ZIP **3364 NE 34 STREET
FT LAUDERDALE, FL 33308**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Sr. Christoff SVETLANA CHRISTOFF**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6/27/04

Attachment

Doc. # 0000099865-

54059505-

02 0212 6389
PASSENGER TICKET AND BAGGAGE CHECK
SUBJECT TO CONDITIONS OF CONTRACT
ISSUED BY
LUFTHANSA
FORT LAUDERDALE FL
/ FORT LAUDERDALE FL
MULTI
CHRISTOPHER SWETLANA
FROM: NOT VALID FOR
TO: TRANSPORTATION THROUGHOUT YOUR JOURNEY
NON-REF/NO-NEND/NONTRANS/VALID UA/LH/SK/BD ONLY
DTB02T/AA
30 OCT 91
ISSUED IN EXCHANGE FOR
N/A LH/NUC LH 507349.60XKSH7E/-VIE LH X/FBA LH NTA319.50XKSH7E NUC668.50END ROEL
80117.801Y3.10KA2.50AY32.80YQ22.78RA5.28AT15.88ZV4.50XNIAA.5
PAID USD 669.00 EQUIV FARE PAID
TAXES USD 27.40
TAXES USD 5.00
TAXES USD 92.80
TAXES USD 794.20
STOCK CONTROL NUMBER TX
0 220 7501032030 0
DOCUMENT NUMBER
165354
NOT VALID FOR TRAVEL
220 7501032030 0
IT IS UNLAWFUL TO PURCHASE OR RESELL THIS TICKET FOR ANY
ENTRY OTHER THAN THE ISSUING CARRIER OR ITS AUTHORIZED AGENTS

MEALS
EQP: A340
09HR 25MIN

NON-STOP
REF: YVGNRG
SEAFOOD MEAL
REFRESHMENT/COMP
EQP: A321-200
02HR 00MIN
NON-STOP
REF: YVGNRG

DTB02T/ETR 1

Sorry for the decate, but
but I was away for a month.
Here is a copy of my ticket.
Sincerely
Sethany