

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000103791

Entity Name: MARGARITA COUTURE, INC.

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

1580 SAWGRASS CORP PKWY
STE 130
SUNRISE, FL 33323

New Principal Place of Business:

511 SE 5TH AVENUE
1023
FORT LAUDERDALE, FL 33301

Current Mailing Address:

1580 SAWGRASS CORP PKWY
STE 130
SUNRISE, FL 33323

New Mailing Address:

511 SE 5TH AVENUE
1023
FORT LAUDERDALE, FL 33301

FEI Number: 65-1147962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBROW DUKER & ASSOCIATES, P.A.
2832 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065 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: P () Delete
Name: REIS, MARGARITA
Address: 1580 SAWGRASS CORPORATE PARKWAY STE 130
City-St-Zip: SUNRISE, FL 33323

Title: V (X) Delete
Name: REIS, JEFF
Address: 1580 SAWGRASS CORPORATE PARKWAY STE 130
City-St-Zip: SUNRISE, FL 33323

Title: S (X) Delete
Name: REIS, MARGARITA
Address: 1580 SAWGRASS CORPORATE PARKWAY STE 130
City-St-Zip: SUNRISE, FL 33323

Title: T (X) Delete
Name: REIS, JEFF
Address: 1580 SAWGRASS CORPORATE PARKWAY STE 130
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RESTREPO, MARGARITA
Address: 511 SE 5TH AVENUE SUITE 1023
City-St-Zip: FORT LAUDERDALE, FL 33301

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: MARGARITA RESTREPO

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date