

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000113189

Entity Name: FLEURISSIMA, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

4242 NE 2ND AVE
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

4242 NE 2ND AVE
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 04-3509208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMARCHE, ANTOINE G
4242 NE 2ND AVE
MIAMI, FL 33137 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: ROBBA, EMILIO
Address: 4242 NE 2ND AVE
City-St-Zip: MIAMI, FL 33137

Title: S () Delete
Name: HARDY, MARY J
Address: 303 GOGNEWAUGH RD
City-St-Zip: GREENWICH, COS COB, CT 06807,

Title: V () Delete
Name: ROBBA, MICHEL
Address: 4242 NE 2ND AVE
City-St-Zip: MIAMI, FL 33137

Title: T () Delete
Name: DE REGAINI, JEAN-PIERRE
Address: 5 RUE DE LA BANQUE
City-St-Zip: PARIS 75002 FRANCE,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ANTOINE LAMARCHE

MR

04/29/2009

Electronic Signature of Signing Officer or Director

Date