

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000083516

Entity Name: ALLURE ENTERPRISES INC.

FILED  
Jan 28, 2008  
Secretary of State

## Current Principal Place of Business:

14341 ARLINGTON PL.  
DAVIE, FL 333251216

## New Principal Place of Business:

## Current Mailing Address:

14341 ARLINGTON PL.  
DAVIE, FL 333251216

## New Mailing Address:

FEI Number: 16-1619040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WINTERS, DIANE  
14341 ARLINGTON PL.  
DAVIE, FL 333251216 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: D ( ) Delete  
Name: VITALE, LAURA  
Address: 4600 S.W. 143 AVE  
City-St-Zip: MIRAMAR, FL 33027

Title: DI ( ) Delete  
Name: WINTERS, DIANE  
Address: 14341 ARLINGTON PL.  
City-St-Zip: DAVIE, FL 33325

Title: P ( ) Delete  
Name: VITALE, LAURA  
Address: 4600 S.W. 143 AVE  
City-St-Zip: MIRAMAR, FL 33027

Title: S ( ) Delete  
Name: WINTERS, DIANE  
Address: 14341 ARLINGTON PL.  
City-St-Zip: DAVIE, FL 33325

## 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: DIANE WINTERS

S

01/28/2008

Electronic Signature of Signing Officer or Director

Date