## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000104282

City-St-Zip:

AVENTURA, FL 33180

FILED Mar 20, 2009 Secretary of State

Entity Nai	me: ASTORIA	A COUTURE, INC.				
Current Principal Place of Business:				New Principal Place of Business:		
837 LINCOLN ROAD MIAMI BEACH, FL 33139				837 LINCOLN RD. MIAMI BEACH, FL 33139		
Current Mailing Address:				New Mailing Address:		
300 ARTHUR GODFGREY BLVD STE 202 MIAMI BEACH, FL 33140				837 LINCOLN RD. MIAMI BEACH, FL 33139		
FEI Number:	: 11-3655439	FEI Number Applied For()	FEI Number No	ot Applicable ( )	Certificate of Status Desire	ed ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
AMAR, MICHAEL 300 W 41ST ST MIAMI BEACH, FL 33140 US				AMAR, MICHAEL 837 LINCOLN RD. MIAMI BEACH, FL 33139 US		
	named entity e of Florida.	submits this statement for t	he purpose of chan	ging its registered	d office or registered agent	, or both,
SIGNATURE: MICHAEL AMAR				03/20/2009		
Electronic Signature of Registered Agent				Date		
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	AMAR, MICHAE 19425 39 AVE	) Delete EL BEACH, FL 33160	Title: Name: Addres City-S	ss:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( AMUIAL, YOSE 2831 NE 185TH AVENTURA, FL	H ST. #605	Title: Name: Addres City-S	ss:	()Change ()Addition	
Title: Name: Address:	D ( AMUIAL, DANIE 20870 NE 32 A		Title: Name: Addre		( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: MICHAEL AMAR D 03/20/2009