

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015081

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: ALBA HOME REMODELING, INC.

**Current Principal Place of Business:**

3640 56TH AVE NO APT B  
ST PETERSBURG, FL 33714

**New Principal Place of Business:**

**Current Mailing Address:**

3640 56TH AVE NO APT B  
ST PETERSBURG, FL 33714

**New Mailing Address:**

FEI Number: 02-0674553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MALLKAZI, ILIR  
3640 56TH AVE NO APT B  
ST PETERSBURG, FL 33714 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: MALLKAZI, ILIR  
Address: 3640 56TH AVE NO APT B  
City-St-Zip: ST PETERSBURG, FL 33714

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ILIR MALLKAZI

D

04/25/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date