

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015081

Entity Name: ALBA HOME REMODELING, INC.

FILED
Apr 29, 2007
Secretary of State

Current Principal Place of Business:

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

New Principal Place of Business:

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

Current Mailing Address:

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

New Mailing Address:

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

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:

MALLKAZI, ILIR
3640 56TH AVE NO APT C
ST PETERSBURG, FL 33714 US

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: ILIR MALLKAZI

04/29/2007

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: D (X) Change () Addition
Name: MALLKAZI, ILIR
Address: 3640 56TH AVE NO APT C
City-St-Zip: ST PETERSBURG, FL 33714

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: ILIR MALLKZI

PRES

04/29/2007

Electronic Signature of Signing Officer or Director

Date