

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025395

FILED  
Feb 10, 2009  
Secretary of State

Entity Name: ANDREA FITTIPALDI COSMETICS INC.

## Current Principal Place of Business:

2290 BOCA RATON BLVD  
SUITE #2  
BOCA RATON, FL 33431 US

## New Principal Place of Business:

## Current Mailing Address:

17360 SW 232 STREET  
APT 16  
MIAMI, FL 33170 US

## New Mailing Address:

17360 SW 232 STREET  
LOT# 16  
MIAMI, FL 33170 US

FEI Number: 32-0109114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PALMEIRA, ANDREA  
17360 SW 232 STREET  
APT 16  
MAIMI, FL 33170 US

## Name and Address of New Registered Agent:

PALMEIRA, ANDREA  
17360 SW 232 STREET  
LOT # 16  
MAIMI, FL 33170 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: ANDREA PALMEIRA

02/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PALMEIRA, ANDREA  
Address: 17360 SW 232 STREET # 16  
City-St-Zip: MIAMI, FL 33170 US

Title: VP ( ) Delete  
Name: MIZUKOSHI, DEBORAH P  
Address: 2030 ALTA MEADOWS LANE, 1209  
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP ( ) Delete  
Name: GONZALEZ, ELIEZER  
Address: 17360 SW 232 STREET APT#16  
City-St-Zip: MIAMI, FL 33170

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: GONZALEZ, ELIEZER  
Address: 17360 SW 232 STREET APT#16  
City-St-Zip: MIAMI, FL 33170 US

Title: VP (X) Change ( ) Addition  
Name: MIZUKOSHI, DEBORAH  
Address: 2032 ALTA MEADOWS LANE, 1107  
City-St-Zip: DELRAY BEACH, FL 33444

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: ANDREA PALMEIRA

P

02/10/2009

Electronic Signature of Signing Officer or Director

Date