

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119276

Entity Name: ALB, INC

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

2121 CORPORATE SQUARE BLVD.
SUITE 255
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

2121 CORPORATE SQUARE BLVD.
SUITE 255
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 03-0547762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TUSHA, LUVIGJ
2121 CORPORATE SQUARE BLVD.
JACKSONVILLE, FL 32216 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: P () Delete
Name: TUSHA, LUVIGJ
Address: 11652 SUMMER BROOK CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: VP () Delete
Name: TUSHA, KASTRIOT
Address: 11652 SUMMER BROOK CT
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: TUSHA, KASTRIOT
Address: 5558 GREENLAND RD
City-St-Zip: JACKSONVILLE, FL 32258

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: KASTRIOT TUSHA

VP

04/27/2007

Electronic Signature of Signing Officer or Director

Date