## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000137780

Entity Name: FUSSE ENTERPRIZES INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1600 MICHIGAN AVE 327 NE 59TH TERRACE UNIT # 2 MIAMI, FL 33138

MIAMI # 2 MIAMI, MIAMI BEACH, FL 33139

Current Mailing Address: New Mailing Address:

1600 MICHIGAN AVE 327 NE 59TH TERRACE UNIT # 2 MIAMI, FL 33138 MIAMI BEACH, FL 33139

FEI Number: 20-0029672 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SOSA, ALEJANDRO A
1600 MICHIGAN AVE.
UNIT # 2
SOSA, ALEJANDRO A
327 NE 59TH TERRACE
MIAMI, FL 33138 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: ALEJANDRO SOSA 04/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

MIAMI BEACH, FL 33139 US

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

Title: MR. ( ) Delete Title: MR. (X) Change ( ) Addition

 Name:
 SOSA, ABEL
 Name:
 SOSA, ABEL

 Address:
 1600 MICHIGAN AVE.
 Address:
 9708 SOTWEED DR.

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 POTOMAC, MD 20854

Title: MR. ( ) Delete Title: MR. (X) Change ( ) Addition

 Name:
 SOSA, ALEJÂNDRO A
 Name:
 SOSA, ALEJÂNDRO A

 Address:
 1600 MICHIGAN AVE.
 Address:
 327 NE 59TH TERRACE

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:
 MIAMI, FL 33137

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: ABEL SOSA MR. 04/16/2009