

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000153100

Entity Name: R. Y. E. IMPORT EXPORT, INC.

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

318 INDIAN TRACE
SUITE 409
FORT LAUDERDALE, FL 33326

New Principal Place of Business:

Current Mailing Address:

318 INDIAN TRACE
SUITE 409
FORT LAUDERDALE, FL 33326

New Mailing Address:

FEI Number: 20-1932903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIRAG, YSTVAN
1047 WATERSIDE CIRCLE
WESTON, FL 33327 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: VIRAG, LAZLO
Address: PO BOX 025323
City-St-Zip: MIAMI, FL 331025323

Title: T () Delete
Name: VIRAG, JULIANA N
Address: PO BOX 025323
City-St-Zip: MIAMI, FL 331025323

Title: S () Delete
Name: VIRAG, YSTVAN
Address: 1047 WATERSIDE CIRCLE
City-St-Zip: WESTON, FL 33327

Title: VP () Delete
Name: VIRAG, ZOLTAN
Address: PO BOX 025323
City-St-Zip: MIAMI, FL 331025323

Title: VP () Delete
Name: ALVARADO, NESTOR L
Address: PO BOX 025323
City-St-Zip: MIAMI, FL 331025323

Title: VP () Delete
Name: ALVARADO, ANA J
Address: PO BOX 025323
City-St-Zip: MIAMI, FL 331025323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: YSTVAN VIRAG

S

03/23/2009

Electronic Signature of Signing Officer or Director

Date