

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000059081

Entity Name: ALBE, INC.

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

805 LEE RD  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

18039 SAXONY LANE  
ORLANDO, FL 32820

**New Mailing Address:**

1108 BROUGHTON DRIVE  
BEVERLY, MA 01915

FEI Number: 20-2725325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MISA, ALBAN  
18039 SAXONY LANE  
ORLANDO, FL 32820 US

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

MISA, ALBAN  
8305 FORT CLINCH AVE  
ORLANDO, FL 32822 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/12/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MISA, ALBAN  
Address: 1108 BROUGHTON DRIVE  
City-St-Zip: BEVERLY, MA 01915

Title: D  
Name: AHMETAJ, ENKELEIDA  
Address: 1108 BROUGHTON DRIVE  
City-St-Zip: BEVERLY, MA 01915

I hereby 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 all other like empowered.

SIGNATURE: ALBAN MISA

P

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date