

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000091495

Entity Name: EUGENE ROSE INC.

FILED
Sep 01, 2009
Secretary of State

Current Principal Place of Business:

823 NE 199TH STREET #203
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

823 NE 199TH STREET #203
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 54-0549090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INIJE, CHARLES
06499 NE 19TH AVE.
#213A
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

AB CONSULTING & ACCOUNTING SERVICES INC.
1428 NE 163RD ST
NORTH MIAMI BEACH, FL 33162 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: ANIS BLEMUR

09/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DONALDSON, OWEN
Address: 823 NE 199TH STREET#203
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S (X) Change () Addition
Name: DONALDSON, OWEN
Address: 823 NE 199TH STREET#203
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VPT () Change (X) Addition
Name: PENNELLI, NANCY A
Address: 38 DANFORTH LANE
City-St-Zip: ROCKY HILL, CT 06067

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: OWEN DONALDSON

P

09/01/2009

Electronic Signature of Signing Officer or Director

Date