

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000092220

Entity Name: VOGUE MAVEN, INC.

FILED
Jan 26, 2009
Secretary of State

Current Principal Place of Business:

3375 N. COUNTRY CLUB DR.
APT 403
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

3375 N. COUNTRY CLUB DR.
APT 403
AVENTURA, FL 33180

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPOVILLA, CATHERINE
3375 N. COUNTRY CLUB DR.
UNIT 403
AVENTURA, FL 33180 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, V () Delete
Name: CAPOVILLA, CATHERINE
Address: 3375 N. COUNTRY CLUB DR. UNIT 403
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAPOVILLA, CATHERINE
Address: 3375 N. COUNTRY CLUB DR. UNIT 403
City-St-Zip: AVENTURA, FL 33180

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: CATHERINE CAPOVILLA

MS

01/26/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date