

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020142

Entity Name: AMBRAS, INC.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

717 D ST, NW, STE 311
WASHINGTON, DC 20004

New Principal Place of Business:

717 D ST, NW, STE 319
WASHINGTON, DC 20004

Current Mailing Address:

717 D ST, NW, STE 311
WASHINGTON, DC 20004

New Mailing Address:

717 D ST, NW, STE 319
WASHINGTON, DC 20004

FEI Number: 20-4267686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FERREIRA, SONIA
931 SW CONSOLATA AVENUE
PORT ST. LUCIE, FL 34953 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: D () Delete
Name: FERREIRA, SONIA
Address: 931 SW CONSOLATA AVE.
City-St-Zip: PORT ST LUCIE, FL 349532878

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERREIRA, SONIA
Address: 931 SW CONSOLATA AVE.
City-St-Zip: PORT ST LUCIE, FL 34953

Title: VP () Change (X) Addition
Name: LEAO, ADEMIR
Address: C/O AMBRAS, INC. 717 D STREET, NW, SUITE 3
City-St-Zip: WASHINGTON, DC 20004

Title: VP () Change (X) Addition
Name: DE OLIVEIRA, DANILO
Address: 931SW CONSOLATA
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VP () Change (X) Addition
Name: DA SILVA, IGOR
Address: 931 SW CONSOLATA AVE.
City-St-Zip: PORT ST. LUCIE, FL 3.4953

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: SONIA FERREIRA

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date