

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000106423

FILED  
Mar 27, 2009  
Secretary of State

Entity Name: IBELLAV INC.

## Current Principal Place of Business:

940 LINCOLN ROAD  
SUITE 221  
MIAMI BEACH, FL 33139 US

## New Principal Place of Business:

1300 COLLINS AVE.  
SUITE 1A  
MIAMI BEACH, FL 33139 US

## Current Mailing Address:

1504 BAY ROAD  
#827  
MIAMI BEACH, FL 33139

## New Mailing Address:

FEI Number: 20-5374011      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VILLENA, HUGO  
1504 BAY ROAD  
#827  
MIAMI BEACH, FL 33139 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: SIENKIEWICZ, IZABELLA  
Address: 1504 BAY ROAD #827  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP ( ) Delete  
Name: VILLENA, HUGO  
Address: 1504 BAY ROAD #827  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: CIO ( ) Delete  
Name: VILLENA, HUGO  
Address: 1504 BAY ROAD #827  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: CFO ( ) Delete  
Name: VILLENA, HUGO  
Address: 1504 BAY ROAD #827  
City-St-Zip: MIAMI BEACH, FL 33139 US

## 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:

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: HV \_\_\_\_\_

Electronic Signature of Signing Officer or Director

VP \_\_\_\_\_

03/27/2009 \_\_\_\_\_

Date