2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000114495

Entity Name: FENIWEL INC.

City-St-Zip:

MIAMI, FL 331742359

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	LAGLERS ST 331742359	., #13			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	LAGLERS ST 331742359	., #13			
FEI Number	: 20-5543612	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
9000 W. F	OMO, LEO F LAGLERS ST 331742359 l	.,#13 JS			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	LARIO LUIS, J	ELERS ST., #13	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LARIO ABIAN,	ELERS ST., #13	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	CRISOSTOMO) Delete , LEO F ;LERS ST., #13	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: LEO FRANK CRISOSTOMO SD 03/10/2009