## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000131621

Entity Name: CANELLABEACH USA CORP

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4775 COLLINS AVE 4207 4203 MIAMI, FL 33140 4775 COLLINS AVE 4775 COLLINS AVE

Current Mailing Address: New Mailing Address:

 4775 COLLINS AVE
 4775 COLLINS AVE

 4207
 2503

 MIAMI, FL 33140
 MIAMI, FL 33140

FEI Number: 43-2113619 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOLEDANO, GEORGE

19588 SATURNIA LAKES DRIVE
BOCA RATON, FL 33498 US

JADE ASSOCIATES MIAMI INC
100 N BISCAYNE BLVD
500
MIAMI, FL 33132 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: OLIVIER SUREAU 04/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition AMSELLEM, STEPHANE AMSELLEM, STEPHANE Name: Name: 4775 COLLINS AVENUE 4775 COLLINS AVENUE APT 2503 Address: Address: City-St-Zip: MIAMI, FL 33140 City-St-Zip: MIAMI, FL 33140

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 TOLEDANO, GEORGE
 Name:

 Address:
 19588 SATURNIA LAKES DRIVE
 Address:

 City-St-Zip:
 BOCA RATON, FL 33498
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 AMSELLEM, ARMAND
 Name:

 Address:
 POINTE DE LA VERDURE BP 73
 Address:

 City-St-Zip:
 GOSIER GUADELOUPE, FR 47190 FR
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 MOYAL, SYLVÍE
 Name:

 Address:
 6 AVENUE DU PARC DE PASSY
 Address:

 City-St-Zip:
 PARIS, FR 75016 FR
 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: STEPHANE AMSELLEM P 04/28/2009