

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000048487

FILED
Apr 16, 2009
Secretary of State

Entity Name: YANINA II INC

Current Principal Place of Business:

10275 COLLINS AVE
#1429
BAL HARBOUR, FL 33154

New Principal Place of Business:

Current Mailing Address:

451-455 POMPTON AVE
CEDAR GROVE, NJ 07109

New Mailing Address:

FEI Number: 20-8878829 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEYSHER, CLAUDIA
10275 COLLINS AVE STE 1429
#1429
BAL HARBOUR, FL 33154 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: TRES () Delete
Name: FLEYSHER, CLAUDIA
Address: 451 - 455 POMPTON AVENUE
City-St-Zip: CEDAR GROVE, NJ 07109

Title: PRES () Delete
Name: SHEEHAN, YANINA
Address: 451 - 455 POMPTON AVENUE
City-St-Zip: CEDAR GROVE, NJ 07109

Title: SECY () Delete
Name: FLEYSHER, ALEXANDER
Address: 451 - 455 POMPTON AVENUE
City-St-Zip: CEDAR GROVE, NJ 07109

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:

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: RAYMOND TOSCANO

CPA

04/16/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date