2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097437

Entity Name: COLLAGE CO

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

2049 S OCEAN DR 3400 NE 192 ST

1510 1110

HALLANDALE, FL 33009 AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

2049 S OCEAN DR 3400 NE 192 ST

1510 1110 AVENTURA EL 22000 AVENTURA EL 22100

HALLANDALE, FL 33009 AVENTURA, FL 33180

FEI Number: 26-0820441 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:

KACHER, VAL
2049 S OCEAN DR
3400 NE 192 ST

1510 1110 1110 HALLANDALE, FL 33009 US AVENTURA, FL 33180 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: 04/22/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 KACHER, VAL
 Name:
 KACHER, VAL

 Address:
 2049 S OCEAN DR, # 1510
 Address:
 3400 NE 192 ST # 1110

 City-St-Zip:
 HALLANDALE, FL 33009
 City-St-Zip:
 AVENTURA, FL 33180

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

 Name:
 KACHER, STELLA
 Name:
 KACHER, STELLA

 Address:
 2049 S OCEAN DR, # 1510
 Address:
 3400 NE 192 ST # 1110

 City-St-Zip:
 HALLANDALE, FL 33009
 City-St-Zip:
 AVENTURA, FL 33180

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: VAL KACHER P 04/22/2009