## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000127254

Entity Name: GENAL, INC

FILED Mar 04, 2008 Secretary of State

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

171-173 SUNNY ISLES BLVD SUNNY ISLES BEACH, FL 33160

Current Mailing Address: New Mailing Address:

171-173 SUNNY ISLES BLVD SUNNY ISLES BEACH, FL 33160

FEI Number: 26-1476273 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:

GLAZER, BRONYA 26 DIPLOMAT PARKWAY COMMERCIAL 2 HALLANDALE BEACH, FL 33009 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.

III the State of Floric

SIGNATURE: Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: SHPAK, EVGENY Name: SHPAK, EVGENY

Address: 1800 SOUTH OCEAN DR, APT #4108 Address: 171-173 SUNNY ISLES BLVD
City-St-Zip: HALLANDALE, FL 33009 City-St-Zip: SUNNY ISLES BEACH, FL 33160

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

Name: SHPAK, LUBOV Name: SHPAK, LUBOV

 Address:
 1800 SOUTH OCEAN DR, APT 4108
 Address:
 171-173 SUNNY ISLES BLVD

 City-St-Zip:
 HALLANDALE, FL 33009
 City-St-Zip:
 SUNNY ISLES BEACH, FL 33160

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

 Name:
 UDLER, ALLA
 Name:

 Address:
 1850 SOUTH OCEAN DR. APT # 3004
 Address:

 City-St-Zip:
 HALLANDALE, FL 33009
 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: EVGENY SHPAK PD 03/04/2008