

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000000081

FILED
Apr 29, 2009
Secretary of State

Entity Name: PEPE ALBA EUROPEAN DESIGN, INC

Current Principal Place of Business:

826 MARGINAL RD
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

826 MARGINAL RD
WEST PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 26-1663478 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FROEHLICH & DE LA RUA CPA FIRM LLC
12008 SOUTH SHORE BLVD
SUITE 211
WELLINGTON, FL 33414 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: P () Delete
Name: ALBA FERNANDEZ, JOSE
Address: 2647 N GARDEN DR APT 106
City-St-Zip: LAKE WORTH, FL 33461

Title: VP () Delete
Name: RUIZ SARDIÑA, MARIA R
Address: 2647 N GARDEN DR APT 106
City-St-Zip: LAKE WORTH, FL 33461

Title: S () Delete
Name: DOMINGUEZ, JORGE
Address: 2647 N GARDEN DR APT 106
City-St-Zip: LAKE WORTH, FL 33461

Title: VP () Delete
Name: DE LA RUA, RAUL A
Address: 826 MARGINAL RD
City-St-Zip: WEST PALM BEACH, FL 33411

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:

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: BEATRIZ DE LA RUA, CPA

RA

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date