

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026215

FILED
Apr 29, 2009
Secretary of State

Entity Name: STYLES BY ALEXANDRA, INC.

Current Principal Place of Business:

21085 NE 34TH AVE
206
AVENTURA, FL 33180 US

New Principal Place of Business:

Current Mailing Address:

21085 NE 34TH AVE
206
AVENTURA, FL 33180 US

New Mailing Address:

FEI Number: 26-2174251 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALEFAKIS, ALEXANDRA A
21085 NE 34TH AVE
206
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

NIKIFORIDIS, ALEXANDRA A
21085 NE 34TH AVE
206
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: ALEXANDRA NIKIFORIDIS

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MALEFAKIS, ALEXANDRA A
Address: 21085 N.E 34TH AVE #206
City-St-Zip: AVENTURA, FL 33180 US

Title: S () Delete
Name: MALEFAKIS, ALEXANDRA A
Address: 21085 N.E. 34TH AVE #206
City-St-Zip: AVENTURA, FL 33180 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NIKIFORIDIS, ALEXANDRA A
Address: 21085 N.E 34TH AVE #206
City-St-Zip: AVENTURA, FL 33180 US

Title: S (X) Change () Addition
Name: NIKIFORIDIS, ALEXANDRA A
Address: 21085 N.E. 34TH AVE #206
City-St-Zip: AVENTURA, FL 33180 US

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: ALEXANDRA NIKIFORIDIS

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date