2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000036551

City-St-Zip:

PARIS, FR 75006 FR

Entity Name: SYBELIA VENTURES CORPORATION

FILED May 22, 2009 Secretary of State

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Current Principal Place of Business:			New Principal P	New Principal Place of Business:		
407 LINCO	LN RD		100 N BISCAYNE	IE BLVD		
12F MIAMI, FL	33139 U	S	STE 500 MIAMI, FL 33132	32 US		
Current Mailing Address:			New Mailing Ad	New Mailing Address:		
407 LINCO	LN RD		100 N BISCAYNE	IE BLVD		
12F MIAMI, FL 33139 US				STE 500 MIAMI, FL 33132 US		
FEI Number:	26-2992464	FEI Number Applied For ()	FEI Number Not Applicable (e () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:		
ELMALEH, VANESSA 407 LINCOLN RD 12F MIAMI, FL 33139 US			100 N BISCAYNE STE 500	JADE ASSOCIATES MIAMI INC 100 N BISCAYNE BLVD STE 500 MIAMI, FL 33132 US		
The above in the State	named entit of Florida.	y submits this statement for the p	urpose of changing its regi	gistered office or registered agent, or both,		
SIGNATUR	RE: OLIVIE	R SUREAU		05/22/2009		
	Electr	onic Signature of Registered Age	nt	Date		
		193(2)(b), F.S., the corporation did not ing Trust Fund Contribution ().	receive the prior notice.			
OFFICERS	S AND DIRE	CTORS:	ADDITIONS/CH/	HANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P BENICHOU, 133 BLVD S' PARIS, FR	T GERMAIN	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T BENICHOU, 133 BLVD ST PARIS, FR	T GERMAIN	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address:	S BENICHOU, 133 BLVD S		Title: Name: Address:	() Change () Addition		

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.

City-St-Zip:

SIGNATURE: PHILIPPE BENICHOU P 05/22/2009