

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000045510

FILED  
Mar 16, 2011  
Secretary of State

Entity Name: ALEXANDRE'S, INC.

**Current Principal Place of Business:**

1760 CHATHAM CIR  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

1760 CHATHAM CIR  
APOPKA, FL 32703 US

**New Mailing Address:**

P.O. BOX 607011  
ORLANDO, FL 32860 US

FEI Number: 26-2775967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST. SUITE 500  
ORLANDO, FL 32804 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

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: ALEXANDRE, MAUDELAIRE  
Address: 1760 CHATHAM CIR  
City-St-Zip: APOPKA, FL 32703 US

Title: O  
Name: ALEXANDRE, ELIJAH J  
Address: 1760 CHATHAM CIR  
City-St-Zip: APOPKA, FL 32703

Title: O  
Name: CAYO, JALEEYAH  
Address: 1760 CHATHAM CIR  
City-St-Zip: APOPKA, FL 32703

I hereby 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 all other like empowered.

SIGNATURE: MAUDELAIRE ALEXANDRE

PSTD

03/16/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date