

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000084149

Entity Name: FOODLIB, INC.

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

6341 COW PEN ROAD
APT. X-104
MIAMI LAKES, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

6341 COW PEN ROAD
APT. X-104
MIAMI LAKES, FL 33014 US

New Mailing Address:

FEI Number: 26-3518562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALBERT, ADAM
6341 COW PEN ROAD
APT. X-104
MIAMI LAKES, FL 33014 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: PDST () Delete
Name: ALBERT, ADAM
Address: 6341 COW PEN ROAD, APT. X-104
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: V () Delete
Name: GOMEZ, ARIAN
Address: 5921 SW 164 COURT
City-St-Zip: MIAMI, FL 33193 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALBERT, ADAM
Address: 6341 COW PEN ROAD, APT. X-104
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: V (X) Change () Addition
Name: ALBERT, ANELLE M
Address: 6341 COW PEN ROAD, APT. X-104
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: VS () Change (X) Addition
Name: URBINA, ALBA C
Address: 5480 W 24 AVE. APT. 101
City-St-Zip: HIALEAH, FL 33016 US

Title: VT () Change (X) Addition
Name: MEDINA, JUAN M
Address: 5480 W 24 AVE. APT. 101
City-St-Zip: HIALEAH, FL 33016 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: ADAM ALBERT

PD

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date