

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000015549

Entity Name: ALBESURE, INC

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

180 NE 4TH AVE  
409  
DELRAY BEACH, FL 33483 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

180 NE 4TH AVE  
409  
DELRAY BEACH, FL 33483 US

## **New Mailing Address:**

FEI Number: 26-4344037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RIVERA, ELVIS  
340 W PALMETTO PARK ROAD  
505  
BOCA RATON, FL 33432 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: P, D  
Name: ALBE, BRIAN  
Address: 180 NE 4TH AVE  
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: S  
Name: RIVERA, ELVIS  
Address: 180 NE 4TH AVE #206  
City-St-Zip: DELRAY BEACH, FL 33483

Title: T  
Name: ALBE, BRIAN  
Address: 180 NE 4TH AVE # 409  
City-St-Zip: DELRAY BEACH, FL 33483

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: BRIAN ALBE

P, D

03/06/2012

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

\_\_\_\_\_  
Date