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Aug 29, 2006 8:00 am
Secretary of State
08-15-2006 90002 044 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P29866

1. Entity Name
ALBA WHEELS UP INTERNATIONAL INC.

Principal Place of Business	Mailing Address
150 30 132 AVENUE 208 JAMAICA, NY 11434	150 30 132 AVENUE 208 JAMAICA, NY 11434

DO NOT WRITE IN THIS SPACE

07112006 No Chg-P CR2E034 (11/05)

4. FEI Number
13-5553334
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PETERSEL, ROBERTA
1605 CYPRESS POINTE DRIVE
CORAL SPRINGS, FL 33065

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, type or print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	STILE, SALVATORE J I
STREET ADDRESS	300 E 34TH ST
CITY-ST-ZIP	NEW YORK, NY 10016
TITLE	P
NAME	STILE, DAMIEN
STREET ADDRESS	300 E 34TH ST
CITY-ST-ZIP	NEW YORK, NY 10016
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: _____ 8/24/06 718-276-3060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DAMIEN STILE

ATTACHMENT
660236007
#P29866

NEW JERSEY OFFICE
Tel: (201) 435-7050 • Fax: (201) 435-5650
E-Mail: jersey@alba-wheelsup.com
Website: www.albawheelsup.com

MIAMI OFFICE
Tel: (305) 499-9994 • Fax: (305) 499-9995
E-Mail: miami@alba-wheelsup.com
Website: www.albawheelsup.com

LOS ANGELES OFFICE
Tel: (310) 410-8030 • Fax: (310) 410-8040
E-Mail: la@alba-wheelsup.com
Website: www.albawheelsup.com

150-30 132nd Avenue • Suite 208 • Jamaica, NY 11434
Tel: (718) 276-3000 • Fax (718) 712-1222
E-Mail: jfk@alba-wheelsup.com • Website: www.albawheelsup.com

August 25, 2006

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Gentlemen:

We confirm receipt of your letter of August 15, 2006 concerning Reference Number P29866, wherein you advised that our Annual Report for 2006 was received with payment. However, we erroneously omitting signing the form.

Per your request, attached is the report duly signed. We trust all is now in order.

Thank you.

Very truly yours,

Mary Ann Gajdos – Office Administrator