

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36851

FILED
Apr 17, 2006
Secretary of State

Entity Name: ALBA HEALTH PRODUCTS, INC.

Current Principal Place of Business:

1370 W INDUSTRIAL AVE
UNIT 109
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

9604 EL CLAIR RANCH RD.
BOYNTON BEACH, FL 33437 US

Current Mailing Address:

1370 W INDUSTRIAL AVE
UNIT 109
BOYNTON EBAHC, FL 33426 US

New Mailing Address:

P.O.BOX 4668
BOYNTON BEACH, FL 334244668 US

FEI Number: 58-1768018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BACHE, ALAIN
9640 EL CLAIR RANCH RD.
BOYNTON BCH., FL 33437 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: DCP () Delete
Name: BACHE, ALAIN,
Address: 9604 EL CLAIR RANCH RD.
City-St-Zip: BOYNTON BCH., FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP (X) Change () Addition
Name: BACHE, ALAIN,
Address: 9604 EL CLAIR RANCH RD.
City-St-Zip: BOYNTON BCH., FL 33437

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAIN BACHE

PRES

04/17/2006

_____ Electronic Signature of Signing Officer or Director

_____ Date