

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000021067

Entity Name: AFFAIRES & PLAISIR, INC.

FILED  
Jul 02, 2007  
Secretary of State

## Current Principal Place of Business:

17050 N BAY RD  
303  
MIAMI, FL 33160

## Current Mailing Address:

17050 N BAY RD  
303  
MIAMI, FL 33160

## New Principal Place of Business:

16500 COLLINS AVENUE  
1651  
SUNNY ISLES BEACH, FL 33160

## New Mailing Address:

16500 COLLINS AVENUE  
1651  
SUNNY ISLES BEACH, FL 33160

FEI Number: 65-0901147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERNAN, VERGARA  
17050 NORTH BAY RD., 303  
SUNNY ISLES, FL 33160 US

## Name and Address of New Registered Agent:

HERNAN, VERGARA  
16500 COLLINS AVENUE  
1651  
SUNNY ISLES, FL 33160 US

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: HERNAN VERGARA

07/02/2007

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: VERGARA, HERNAN A  
Address: 17050 N BAY RD #303  
City-St-Zip: MIAMI, FL 33160 OC

Title: DVS ( ) Delete  
Name: LIBSFUNT, PATRICIA  
Address: 17050 N BAY RD #303  
City-St-Zip: MIAMI, FL 33160 OC

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: VERGARA, HERNAN A  
Address: 16500 COLLINS AVENUE #1651  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 OC

Title: DVS (X) Change ( ) Addition  
Name: LIBSFRANT, PATRICIA  
Address: 16500 COLLINS AVENUE #1651  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 OC

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: HERNAN VERGARA

DPT

07/02/2007

Electronic Signature of Signing Officer or Director

Date