

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070725

FILED  
Mar 22, 2006  
Secretary of State

Entity Name: ALJESS ENTERPRISES INC.

## Current Principal Place of Business:

5455 S W 8TH ST  
235  
MIAMI, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

5455 S W 8TH ST  
235  
MIAMI, FL 33134 US

## New Mailing Address:

FEI Number: 20-1076322      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALONSO, JESSICA B  
5701 SW 136TH ST  
PINECREST, FL 33156 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: PRES ( ) Delete  
Name: ALONSO, CARIDAD G  
Address: 5701 SW 136TH ST  
City-St-Zip: PINECREST, FL 33156 US

Title: TREA ( ) Delete  
Name: ALONSO, JESSICA B  
Address: 5701 SW 136TH ST  
City-St-Zip: PINECREST, FL 33156 US

Title: VP ( ) Delete  
Name: ALONSO, ALEXANDER  
Address: 4907 TIBBITT LANE  
City-St-Zip: BURKE, VA 22015 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CARIDAD GLORIA ALONSO

PRES

03/22/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date