


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P06000154470</b> 1. Entity Name ALCA A/C & GENERAL MAINTENANCE CORPORATION	
--	---

**FILED**  
**Sep 03, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business 2331 ADAM ST 9 HOLLYWOOD, FL 33020	Mailing Address 2331 ADAM ST 9 HOLLYWOOD, FL 33020
---	---



08062008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-8102753	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

LIZAMA, WILLIAM  
 2331 ADAM ST  
 9  
 HOLLYWOOD, FL 33020

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: 09/03/08-80002-007 150.00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00  
 Due by September 12, 2008

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	NAME	P LIZAMA, WILLIAM
STREET ADDRESS	CITY - ST - ZIP	2331 ADAM ST SUITE 9 HOLLYWOOD, FL 33020
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 empowered.

SIGNATURE: Lizama, William DATE: 9/3/2008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR