

2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 24, 2009
Secretary of State**

DOCUMENT# P95000000153

Entity Name: ROBERT ALLI, INC.

Current Principal Place of Business:

540 SEMINOLE BLVD.
LARGO, FL 33770 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1508
LARGO, FL 337791508 US

New Mailing Address:

FEI Number: 59-3316769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLI, DEAN
11625 WALSINGHAM RD
LARGO, FL 33778 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: MRGM () Delete
Name: ALLI, DONALD
Address: PO BOX 1508
City-St-Zip: LARGO, FL 337791508

Title: D () Delete
Name: ALLI, DEAN
Address: 11625 WALSINGHAM RD
City-St-Zip: LARGO, FL 33778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DEAN ALLI

D

03/24/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date