

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012118

Entity Name: ALAVI-GARCIA ENTERPRISES, INC.

FILED  
Jan 04, 2006  
Secretary of State

## Current Principal Place of Business:

METRO WEST VILLAGE S/C  
2439 S. HIAWASSEE RD  
ORLANDO, FL 32835

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 533736  
ORLANDO, FL 328533736

## New Mailing Address:

PO BOX 533736  
ORLANDO, FL 32853

FEI Number: 59-3586604

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MARTINEZ, LOUIS  
1640 LEE RD  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

ALAVI, SIAMACK  
2439 S. HIAWASSEE RD  
ORLANDO, FL 32835 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: SIAMACK ALAVI

01/04/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTSD ( ) Delete  
Name: GARCIA, FRANCISCO A  
Address: P.O. BOX 617259  
City-St-Zip: ORLANDO, FL 32861 72

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change ( ) Addition  
Name: ALAVI, SIAMACK  
Address: P.O. BOX 533736  
City-St-Zip: ORLANDO, FL 32853

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: SIAMACK ALAVI

PTSD

01/04/2006

Electronic Signature of Signing Officer or Director

Date