

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K73498

FILED
Apr 11, 2009
Secretary of State

Entity Name: ALF'S GOLF SHOP INC.

Current Principal Place of Business:

%15369 S. DIXIE HWY
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

% ALFONSO MARTINEZ
15369 S. DIXIE HIGHWAY
MIAMI, FL 33157

New Mailing Address:

FEI Number: 65-0102105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINEZ, ALFONSO
15369 S. DIXIE HIGHWAY
MIAMI, FL 33157 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: D () Delete
Name: MARTINEZ, ALFONSO
Address: 4825 HAMMOCK LAKE DR.
City-St-Zip: CORAL GABLES, FL 33156

Title: D () Delete
Name: MARTINEZ, EDWARD
Address: 7840 SW 117 ST
City-St-Zip: MIAMI, FL 33156

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: ALFONSO MARTINEZ

PRES

04/11/2009

Electronic Signature of Signing Officer or Director

_____ Date