

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 591301

Entity Name: ALLIED GROWERS, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

800 CYPRESS CREEK ROAD W., #335
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

800 CYPRESS CREEK ROAD W., #335
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 59-1879824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PESKIND, DAVID
800 CYPRESS CREEK ROAD WEST, STE. 335
FT. LAUDERDALE, FL 33309 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: P () Delete
Name: PESKIND, DAVID
Address: 800 CYPRESS CREEK RD., W
City-St-Zip: FT. LAUDERDALE, FL

Title: ST () Delete
Name: LEBLANG, DALE
Address: 800 CYPRESS CREEK RD., W
City-St-Zip: FT. LAUDERDALE, FL

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: DAVID PESKIND

P

04/22/2009

Electronic Signature of Signing Officer or Director

Date