## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 627098** 

Name:

Address:

City-St-Zip:

Entity Name: ALEX'S FLAMINGO GROVES, INC

FILED Apr 13, 2009 Secretary of State

Littly Name: ALEX 31 EAWIINGO GROVES, INC.	
Current Principal Place of Business:	New Principal Place of Business:
236 N FEDERAL HWY DANIA, FL 33004 US	236 N FEDERAL HWY DANIA BEACH, FL 33004 US
Current Mailing Address:	New Mailing Address:
236 N FEDERAL HWY DANIA, FL 33004 US	236 N FEDERAL HWY DANIA BEACH, FL 33004 US
FEI Number: 80-0133006 FEI Number Applied For ( ) FEI N	Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
MEDINA, ARAEL MR 3740 NE 16TH TERRACE FORT LAUDERDALE, FL 33334 US	MEDINA, JOYCE MISS 3740 NE 16TH TERRACE FORT LAUDERDALE, FL 33334 US
The above named entity submits this statement for the purpose in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: JOYCE MEDINA	04/13/2009
Electronic Signature of Registered Agent  Election Campaign Financing Trust Fund Contribution ( ).	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PD () Delete Name: MEDINA, ARAEL MR Address: 3740 NE 16TH TERRACE City-St-Zip: FORT LAUDERDALE, FL 33334 US	Title: () Change () Addition Name: Address: City-St-Zip:
Title: EVP () Delete  Name: MEDINA, JOYCE J MISS  Address: 3740 NE 16TH TERRACE  City-St-Zip: FORT LAUDERDALE, FL 33334 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: ( ) Delete	Title: TRES ( ) Change (X) Addition

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.

Name:

Address:

City-St-Zip:

MEDINA, TERESITA A MRS

FORT LAUDERDALE, FL 33334 US

3740 NE 16TH TERRACE

SIGNATURE: JOYCE MEDINA EVP 04/13/2009