2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006248

Entity Name: ALASKA B.F. INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

50 SW 10TH ST, STE 812 MIAMI, FL 33130

Current Mailing Address: New Mailing Address:

50 SW 10TH ST, STE 812 MIAMI, FL 33130

FEI Number: 98-0423353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DIAZ-SARMIENTO, GABRIEL S CPA
1985 NW 88TH CT, STE 201
MIAMI, FL 33172 US

DIAZ-SARMIENTO, GABRIEL S CPA
15588 SW 62 STREET
MIAMI, FL 33193 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: DIAZ=SARMIENTO, GABRIEL S., CPA 04/30/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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50 SW 10 STREET, SUITE 812

OFFICERS AND DIRECTORS:

DVPT

DS

DIAZ, EDUARDO S

MIAMI, FL 33179

RUIZ. EZEQUIEL R

MIAMI, FL 33179

MIAMI, FL 33179

MIAMI, FL 33130

1985 SW 10TH CT, #201

1985 SW 10TH CT, #201

DE ESPINOSA, OLGA S

1985 SW 10TH CT. #201

MALDONADO, IGNACIO

Title:

Title:

Title:

Title:

Name: Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition

Name: DIAZ, EDUARDO S Address: 50 SW 10TH ST, STE 812

City-St-Zip: MIAMI, FL 33130

Title: DVPT (X) Change () Addition

 Name:
 RUIZ, EZEQUIEL R

 Address:
 50 SW 10TH ST, STE 812

 City-St-Zip:
 MIAMI, FL 33130

Title: DS (X) Change () Addition

Name: DE ESPINOSA, OLGA S Address: 50 SW 10TH ST, STE 812

City-St-Zip: MIAMI, FL 33130

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MALDONADO, IGNACIO S 04/30/2005