## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000005139

KEEFER, PAMELA

268 WATER ST PH-H

NEW YORK, NY 10038

Name:

Address:

City-St-Zip:

Entity Name: ALOCS ENTERPRISES, INC.

FILED Jan 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 23601 WATERSIDE DR. BONITA SPRINGS, FL 34134 **Current Mailing Address: New Mailing Address:** 23601 WATERSIDE DR. BONITA SPRINGS, FL 34134 FEI Number: 55-0857847 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: SCOLA, VINCENT A 23601 WATERSIDE DR. BONITA SPRINGS, FL 34134 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS ( ) Delete Title: () Change () Addition SCOLA, VINCENT A Name: Name: 23601 WATERSIDE DR. Address: Address: City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: SCOLA, VINCENT T Name: PO BOX 3191 Address: Address: CRESTED BUTTE, CO 81224 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition SCOLA, JEFFREY J Name: Name: 105 DUANE ST., PH-H Address: Address: City-St-Zip: NEW YORK, NY 10007 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) 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:

KEEFER, PAMELA

400 CHAMBERS STREET

NEW YORK, NY 10282

SIGNATURE: VINCENT A. SCOLA PRES 01/14/2009