2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001152

Entity Name: BSG ALLIANCE CORP.

FILED Jul 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:				
901 S MOPA AUSTIN, TX		BARTON OAKS II					
Current Mailing Address:			New Mailing Address:				
901 S MOPA AUSTIN, TX		BARTON OAKS II					
FEI Number: 20-5518280 FEI Number Applied For ()		El Number Not Appli	cable () C	ertificate of Status Desired()			
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
1200 SOUT	DRATION SYS H PINE ISLAN DN, FL 33324						
The above r		ibmits this statement for the purp	ose of changing it	s registered offic	ee or registered agent, or both,		
SIGNATUR	E:						
	Electronic	Signature of Registered Agent			Date		
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PAPERMASTER,	JITE 100 BARTON OAKS II	Title: Name: Address: City-St-Zip:	() Cł	nange()Addition		
Title: Name: Address: City-St-Zip:	KERTZMAN, MIT	JITE 100 BARTON OAKS II	Title: Name: Address: City-St-Zip:	KERTZMAN, MITC	ITE 100 BARTON OAKS II		
Title: Name: Address: City-St-Zip:	WEISS, WARRE	JITE 100 BARTON OAKS II	Title: Name: Address: City-St-Zip:	() CI	nange () Addition		
Title: Name: Address: City-St-Zip:	D () C CASH, JIM 901 S MOPAC SI AUSTIN, TX 787	JITE 100 BARTON OAKS II	Title: Name: Address: City-St-Zip:	VP (X) CI MAGIERSKI, BRIA 901 S MOPAC SU AUSTIN, TX 7874	N ITE 100 BARTON OAKS II		
Title: Name: Address: City-St-Zip:	THAMES, COLBY ONE GREENWA' HOUSTON, TX 7	Y PLAZA STE 740 7046	Title: Name: Address: City-St-Zip:	THAMES, COLBY 901 S MOPAC SU AUSTIN, TX 7874			
Title: Name: Address: City-St-Zip:	GRAVELLE, RYA	JITE 100 BARTON OAKS II	Title: Name: Address: City-St-Zip:	() CI	nange () 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.

SIGNATURE: RYAN GRAVELLE S 07/13/2009