

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G46898

Entity Name: A.L.F.B. ENTERPRISES, INC.

FILED  
Apr 03, 2009  
Secretary of State

## Current Principal Place of Business:

15755 NW 15 AVE  
PO BOX 695203  
MIAMI, FL 332699203

## New Principal Place of Business:

15755 NW 15 AVE  
MIAMI, FL 33169

## Current Mailing Address:

15755 NW 15 AVE  
PO BOX 695203  
MIAMI, FL 332699203

## New Mailing Address:

PO BOX 695203  
MIAMI, FL 33269

FEI Number: 52-1311543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BARROSO, JUAN CARLOS  
15755 NW 15TH AVE  
MIAMI, FL 33169 US

## Name and Address of New Registered Agent:

BARROSO, JUAN C TD  
15755 NW 15TH AVE  
MIAMI, FL 33169 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: JUAN C BARROSO

04/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: BARROSO, JUAN CARLOS  
Address: 15755 N.W. 15TH AVENUE  
City-St-Zip: MIAMI, FL 33169

Title: SD ( ) Delete  
Name: CHABAN, SHELDON  
Address: 15755 N.W. 15TH AVENUE  
City-St-Zip: MIAMI, FL 33169

Title: PD ( ) Delete  
Name: BARROSO, OMAIDA  
Address: 15755 NW 15TH AVE  
City-St-Zip: MIAMI, FL 33169

Title: VD ( ) Delete  
Name: CHABAN, PATTIA  
Address: 15755 NW 15TH AVE  
City-St-Zip: MIAMI, FL 33169

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change ( ) Addition  
Name: BARROSO, JUAN C  
Address: 15755 N.W. 15TH AVENUE  
City-St-Zip: MIAMI, FL 33169

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUAN C BARROSO

TD

04/03/2009

Electronic Signature of Signing Officer or Director

Date