2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021259

Entity Name: ALESSANDRI & ASSOCIATES, LLC

1614 PENNSYLVANIA AVE 2F

City-St-Zip: MIAMI BEACH, FL 33139

Address:

FILED Apr 17, 2009 Secretary of State

Current Principal Place of Business:			New Principal	New Principal Place of Business:			
	NSYLVANIA A	/ENUE					
2F MIAMI BEA	ACH, FL 33139) US					
Current N	lailing Addres	s:	New Mailing A	New Mailing Address:			
	REZ, CEBALLO	S & ORTIZ		1614 PENNSYLVANIA AVENUE			
354 SEVIL MIAMI, FL			2F MIAMI BEACH, I	FL 33139	US		
FEI Number	: 14-1843881	FEI Number Applied For ()	FEI Number Not Applicable	() c	ertificate of Status Desired ()		
Name and	d Address of C	urrent Registered Agent:	Name and Add	Name and Address of New Registered Agent:			
1614 PEN 2F	DRI, MICHAEL NSYLVANIA AY ACH, FL 33139	/ENUE					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its reg	jistered offic	e or registered agent, or bot	r	
SIGNATUI	RE:						
	Electron	ic Signature of Registered Age	ent		Date		
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANG	ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	P () ALESSANDRI, I 1614 PENNSYL MIAMI BEACH,	VANIA AVE 2F	Title: Name: Address: City-St-Zip:	() Ch	nange ()Addition		
Title: Name:	S () GRADOS, LUIS	Delete	Title: Name:	() Ch	nange()Addition		

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LUIS GRADOS MGR 04/17/2009