

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L49962

Entity Name: ALOHA INCORPORATED

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

1300 COLLINS AVENUE
#100
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

1300 COLLINS AVENUE
#100
MIAMI BEACH, FL 33139 US

New Mailing Address:

FEI Number: 65-0152967 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHLESSER, MELVYN
1300 COLLINS AVENUE
#100
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: SCHLESSER, MELVYN
Address: 1300 COLLINS AVE, #100
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: TD () Delete
Name: LEEDS, ARTHUR
Address: 215 WEST 83RD STREET
City-St-Zip: NEW YORK, NY

Title: VD () Delete
Name: GERSHON, ROBERT
Address: 312 WEST 55TH STREET
City-St-Zip: NEW YORK, NY

Title: VD () Delete
Name: GERSHON, MELVIN
Address: 312 WEST 55TH STREET
City-St-Zip: NEW YORK, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: MELVYN SCHLESSER

P

03/11/2009

Electronic Signature of Signing Officer or Director

_____ Date