2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010910

FILED Apr 30, 2009 Secretary of State

Entity Na	ime: ALLIANO	CE FOR CENTRAL FLORIDA	SAFETY CORP.		
Current Principal Place of Business:			New Principal Place of Business:		
	RIMROSE DRI' O, FL 32803	VE US			
Current Mailing Address:			New Mailing Address:		
P.O. BOX ORLAND	(141214 O, FL 328141)	214 US			
FEI Numbe	r: 54-2134896	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:		
	, LINDA BROOK DRIV O, FL 32817				
	e named entity te of Florida.	submits this statement for the	purpose of changing its registered	I office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered Ag	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	ESTEP, ROBE 427 N. PRIMR	OSE DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:					
Address: City-St-Zip:	HENRIQUE, L 2510 DOUBLE		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Address:	HENRIQUE, L 2510 DOUBLE OVIEDO, FL SD (GALAS, SCOT 2810 NANCY	OSADA J E TREE PL. 327667073 US) Delete T STREET	Name: Address: City-St-Zip:	() Change () Addition () 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRIQUE J LOSADA TD 04/30/2009