## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000007864

Entity Name: D - ALTERNATIVE, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3400 CORAL WAY 3128 CORAL WAY SUITE 600 MIAMI, FL 33145

Current Mailing Address: New Mailing Address:

3400 CORAL WAY 3128 CORAL WAY SUITE 600 MIAMI, FL 33145 MIAMI, FL 33145

FEI Number: 20-8197317 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:

TOSTA, HECTOR F 3400 CORAL WAY SUITE 600 MIAMI, FL 33145 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: 04/30/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: ERQUIAGA, HECTOR L P (X) Change ( ) Addition Name: ERQUIAGA, HECTOR L

 Address:
 3400 CORAL WAY SUITE 600
 Address:
 3128 CORAL WAY

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33145

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: KARPIUK, LAURIE P Name: KARPIUK, LAURIE P

 Address:
 3400 CORAL WAY SUITE 600
 Address:
 3128 CORAL WAY

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33145

Title: TR () Delete Title: TR (X) Change () Addition

 Name:
 TOSTA, HECTOR F
 Name:
 TOSTA, HECTOR F

 Address:
 3400 CORAL WAY SUITE 600
 Address:
 3128 CORAL WAY

 City-St-Zip:
 MIAMI, FL 33145
 City-St-Zip:
 MIAMI, FL 33145

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: HECTOR TOSTA TR 04/30/2009