


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90187 020 ***150.00

DOCUMENT # P00000032398		
1. Entity Name THE ALLIANCE GROUP INDUSTRIES, INC.		

Principal Place of Business 11400 NW 32 AVENUE MIAMI, FL 33167-2901	Mailing Address 11400 NW 32 AVENUE MIAMI, FL 33167-2901
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40066458



2. Principal Place of Business 11000 NW 92 TERRACE	3. Mailing Address 11000 NW 92 TERRACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.

04242006 Chg-P CR2E034 (11/05)

City & State MIAMI, FL	City & State MIAMI, FL
Zip 33178-2512	Country USA
Zip 33178-2512	Country

4. FEI Number 65-0999698	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GORDON, HOWARD 100 S.E. 2ND STREET, 17TH FLOOR MIAMI, FL 33131	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT PATEL, KIRAN 11400 NW 32 AVENUE MIAMI, FL 331672901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS PATEL, ANIL 11400 NW 32 AVENUE MIAMI, FL 331672901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PATEL, DIPAK 11400 NW 32 AVENUE MIAMI, FL 331672901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS PATEL, VIJAY 11400 NW 32 AVENUE MIAMI, FL 331672901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V IRVINE, THOMAS 11400 NW 32 AVENUE MIAMI, FL 331672901 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT PATEL, KIRAN 11000 NW 92 TERRACE MIAMI, FL 33178-2512 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS PATEL, ANIL 11000 NW 92 TERRACE MIAMI, FL 33178-2512 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PATEL, DIPAK 11000 NW 92 TERRACE MIAMI, FL 33178-2512 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS PATEL, VIJAY 11000 NW 92 TERRACE MIAMI, FL 33178-2512 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V IRVINE, THOMAS 7141 NW 70 TERRACE PARKLAND, FL 33067 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  KIRAN PATEL	4-24-06	305-688-2250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #