


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90042 002 ***150.00

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

Principal Place of Business 11000 NW 92 TERR MIAMI, FL 33176-2512	Mailing Address 11000 NW 92 TERR MIAMI, FL 33176-2512
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40096149



04302007 Chg-P CR2E034 (12/06)

4. FEI Number 65-0999698		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent GORDON, HOWARD 100 S.E. 2ND STREET, 17TH FLOOR MIAMI, FL 33131		7. Name and Address of New Registered Agent Name KIRAN PATEL Street Address (P.O. Box Number is Not Acceptable) 11000 NW 92 TERRACE City MIAMI FL Zip Code 33178	
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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 *Kiran Patel* DATE 4/30/07

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT PATEL, KIRAN 11000 NW 92 TERR MIAMI, FL 331782512 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PATEL, ANIL 11000 NW 92 TERR MIAMI, FL 331782512 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PATEL, DIPAK 11000 NW 92 TERR MIAMI, FL 331782512 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS PATEL, VIJAY 11000 NW 92 TERR MIAMI, FL 331782512 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IRVINE, THOMAS 7141 NW 70 TER POMPANO BEACH, FL 33067 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

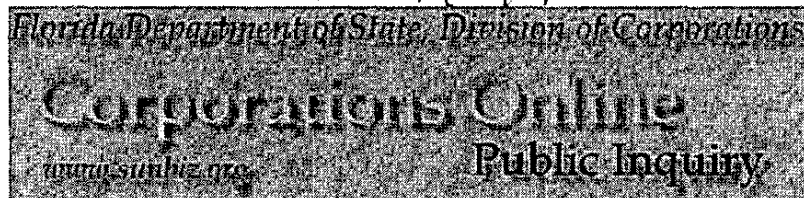
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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* DATE 4/30/07 DAYTIME PHONE # 305-567-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40096149



Florida Non Profit

ANDALUCIA HOMEOWNERS' ASSOCIATION, INC.

PRINCIPAL ADDRESS

9130 CORSEA DEL FONTANA WAY
NAPLES FL 34009

MAILING ADDRESS

9130 CORSEA DEL FONTANA WAY
NAPLES FL 34009Document Number
N04000010433FEI Number
202400818Date Filed
11/01/2004State
FLStatus
ACTIVEEffective Date
NONE

Registered Agent

Name & Address
D JAMOOS, JOSEPH E 9130 CORSEA DEL FONTANA WAY NAPLES FL 34009

Officer/Director Detail

Name & Address	Title
D JAMOOS, JOSEPH 9130 CORSEA DEL FONTANA WAY NAPLES FL 34009	DP
D JAMOOS, ELIZABETH A 9130 CORSEA DEL FONTANA WAY NAPLES FL 34009	DVT
D JAMOOS, JENNIFER 9130 CORSEA DEL FONTANA WAY NAPLES FL 34009	DS

ATTACHMENT 40096149

Annual Reports #P0000003238

Report Year	Filed Date
2005	08/24/2005
2006	08/03/2006

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No Events
No Name History Information

Document Images

Listed below are the images available for this filing.

08/03/2006 -- ANNUAL REPORT
08/24/2005 -- ANNUAL REPORT
11/01/2004 -- Domestic Non-Profit

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