2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039865

Entity Name: ALI MOLINA CORPORATION

FILED Mar 23, 2009 Secretary of State

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

1390 BRICKELL AVENUE STE 100 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1155 BRICKELL BAY DRIVE 1390 BRICKELL AVENUE STE 702 STE 100 MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 65-1001201 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:

ALI, RICARDO

1155 BRICKELL BAY DRIVE
APT 702
MIAMI, FL 33131 US

ALI, RICARDO
1390 BRICKELL AVENUE
STE 100
MIAMI, FL 33131 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: RICARDO ALI 03/23/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: ALI, RICARDO Name: ALI, RICARDO

Address: 1155 BRICKELL BAY DRIVE, APT 702 Address: 1390 BRICKELL AVENUE STE 100

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

 $\label{eq:title:V} \mbox{Title:} \qquad \mbox{V} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{V} \qquad \mbox{(X) Change () Addition}$

Name: MOLINA, LILIANA Name: MOLINA, LILIANA

Address: 1155 BRICKELL BAY DRIVE APT 702 Address: 1390 BRICKELL AVENUE STE 100

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

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: RICARDO ALI P 03/23/2009