

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000080519

Entity Name: ALCOB, INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

1164 8TH AVE WEST
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

1164 8TH AVE WEST
PALMETTO, FL 34221 US

New Mailing Address:

FEI Number: 80-0419741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELGADO, EDMUNDO A D
3911 DAY BRIDGE PLACE
ELLENTON, FL FLORIDA US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CORTES, ALEJANDRO
Address: 615 61ST AVENUE EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: DELGADO, EDMUNDO A
Address: 3911 DAY BRIDGE PLACE
City-St-Zip: ELLENTON, FL 34222

Title: D () Delete
Name: URIETA, TOMAS
Address: 905 3RD AVE. EAST, APT 302
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: URIETA, CRISTINA
Address: 905 3RD AVE. EAST, APT. 302
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: MARIN, NORBERTO
Address: 1308 68TH AVE. WEST
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ALEJANDRO CORTES

P

06/23/2009

Electronic Signature of Signing Officer or Director

Date