

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000022804 1. Entity Name ALEGRIA INVESTMENT ENTERPRISES, INC.	
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Principal Place of Business 307 S. BOULEVARD, STE. D TAMPA, FL 33606	Mailing Address 11300 N CENTRAL AVE TAMPA, FL 33612
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01202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3020896	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LAZZARA, PHILIP R ESQ. 307 S. BOULEVARD, STE. D TAMPA, FL 33606	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

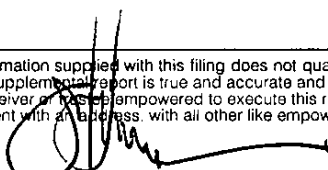
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANSEN, STEVEN A 18205 CLEAR LAKE DR. LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANSEN, SHARON E 18205 CLEAR LAKE DR. LUTZ, FL 33549
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IN THIS SPACE**

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02/02/07-80065-002 150.00

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: 
STEVEN A. HANSEN Date **8/3-933-6561** Daytime Phone #