

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000034679

1. Entity Name
ALEGRIA'S FLORAL PARTY, INC.



Principal Place of Business
10807 S.W. 40TH STREET
MIAMI, FL 33165

Mailing Address
9545 SW 36TH ST.
MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE



04292008 No Chg-P CR2E034 (11/05)

4. FEI Number
68-0499337

Applied For
No: Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANTON, URBANO E
9545 SW 36TH ST.
MIAMI, FL 33165

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IN THIS SPACE

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, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ALEGRIA, GUSTAVO
STREET ADDRESS	10807 S.W. 40TH STREET
CITY- ST- ZIP	MIAMI, FL 33165
TITLE	VD
NAME	ALEGRIA, CARMEN
STREET ADDRESS	10807 S.W. 40TH STREET
CITY- ST- ZIP	MIAMI, FL 33165
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
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NAME	
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TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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IN THIS SPACE

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05/30/08-80038-018 158.75

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: *Carmen Alegria - J. Rps.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/08

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