2008 FOR PROFIT CORPORATION

ANNUAL REPORT **FILED** DOCUMENT # P02000048884 Jan 10, 2008 08:00 AN Secretary of State 1. Entity Name ALFONSO INVESTMENTS, INC. Principal Place of Business Mailing Address 51 WEST 63RD STREET 51 WEST 63RD STREET HIALEAH, FL 33012 HIALEAH, FL 33012 01062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 30-0074897 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ALFONSO, JOSE D DO NOT WRITE 51 WEST 63RD STREET HIALEAH, FL 33012 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ALFONSO, JOSE D . U00000778532 01/11/08-80001-009 150.00 NAME 51 WEST 63RD STREET STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33012 VΠ TITLE NAME ALFONSO, MARIA C STREET ADDRESS 51 WEST 63RD STREET CITY-ST-ZIP MIALEAH, FL 33012 TITLE ALFONSO, ELIO NAME 51 WEST 63RD STREET STREET ADDRESS DO NOT WRITE CITY-ST-ZIP HIALEAH, FL 33012 TITLE IN THIS SPACE ALFONSO, ELIO NAME STREET ADDRESS 51 WEST 63RD STREET CITY-ST-ZIP HIALEAH, FL 33012 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS CITY-ST-ZIP

Elio Altomo