

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089450

FILED
Feb 14, 2006
Secretary of State

Entity Name: ALCORP GROUP, INC.

Current Principal Place of Business:

4784 W COMMERCIAL BLVD
FT. LAUDERDALE, FL 33319

New Principal Place of Business:

5475 NE ST JAMES DR #153
PORT ST LUCIE, FL 34983

Current Mailing Address:

4784 W COMMERCIAL BLVD
FT. LAUDERDALE, FL 33319

New Mailing Address:

5475 NE ST JAMES DR #153
PORT ST LUCIE, FL 34983

FEI Number: 42-1548758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTIDOR, MARJORIE ESQ.
4784 W COMMERCIAL BLVD
FT. LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

ALTIDOR, MARJORIE ESQ.
5475 NE ST JAMES DR
PORT ST LUCIE, FL 34983 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: MARJORIE ALTIDOR

02/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ALTIDOR, NASSER
Address: 4784 W COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: D () Delete
Name: ALTIDOR, NASSER
Address: 4784 W COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: D () Delete
Name: ALTIDOR, MARJORIE
Address: 4784 W COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: PD (X) Delete
Name: ALTIDOR, GRACE
Address: 4784 W COMMERCIAL BLVD
City-St-Zip: FT. LAUDERDALE, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: ALTIDOR, NASSER
Address: 5475 NE ST JAMES DR #153
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D (X) Change () Addition
Name: ALTIDOR, NASSER
Address: 5475 NE ST JAMES DR #153
City-St-Zip: PORT ST LUCIE, FL 34983

Title: D (X) Change () Addition
Name: ALTIDOR, MARJORIE
Address: 5475 NE ST JAMES DR
City-St-Zip: PORT ST LUCIE, FL 34983

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

I hereby certify that the information supplied with this filing does not qualify for the 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: MARJORIE ALTIDOR

D

02/14/2006

Electronic Signature of Signing Officer or Director

Date