2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# P03000067443

Entity Name: ALFLON CORP.

Current Principal Place of Business:

100 SE 1ST STREET
SUITE 21
MIAMI, FL 33131 US

New Principal Place of Business:

6187 NW 167TH ST.
SUITE H21
HIALEAH, FL 33015 US

Current Mailing Address:

100 SE 1ST STREET
SUITE 21
MIAMI, FL 33131 US

New Mailing Address:

6187 NW 167TH ST.
SUITE H21
HIALEAH, FL 33015 US

FEI Number: 20-0050514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARKS, KIM CPA
11900 BISCAYNE BLVD
SUITE 290
MIAMI, FL 33181 US

Name and Address of New Registered Agent:

AQUININ, MARK
6187 NW 167TH ST.
SUITE H21
HIALEAH, FL 33015 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: MARK AQUININ 06/23/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MORIN, JOSE A
Address: 100 SE 1ST STREET STE 21
City-St-Zip: MIAMI, FL 33181

Title: V ( ) Delete
Name: AQUININ, MARK
Address: 100 SE 1ST STREET STE 21
City-St-Zip: MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MORIN, JOSE A
Address: 6187 NW 167TH ST.
City-St-Zip: HIALEAH, FL 33015

Title: V (X) Change ( ) Addition
Name: AQUININ, MARK
Address: 6187 NW 167TH ST.
City-St-Zip: HIALEAH, FL 33015

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: MARK AQUININ V 06/23/2009
Electronic Signature of Signing Officer or Director Date