

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078518

Entity Name: ALTERNI MEDS INC.

FILED
Apr 29, 2008
Secretary of State

Current Principal Place of Business:

13039 SW 133 CT
MIAMI, FL 33186 US

New Principal Place of Business:

2640 SW 28TH LANE
MIAMI, FL 33133 US

Current Mailing Address:

13039 SW 133 CT
MIAMI, FL 33186 US

New Mailing Address:

2640 SW 28TH LANE
MIAMI, FL 33133 US

FEI Number: 13-4258401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE CAIRES, MARIA J
13039 SW 133 CT
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

DE CAIRES, MARIA J
2640 SW 28TH LANE
MIAMI, FL 33133 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE CAIRES, MARIA J
Address: 13039 SW 133 CT
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DE CAIRES, MARIA J
Address: 2640 SW 28TH LANE
City-St-Zip: MIAMI, FL 33133 US

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: MARIA J DE CAIRES

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date