

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000145847

FILED
Apr 29, 2008
Secretary of State

Entity Name: MARCELINO ALVAREZ, P.A.

Current Principal Place of Business:

4864 RED BRICK RUN
LAKE FOREST, FL 32771

New Principal Place of Business:

12460 NW 15TH STREET
APT. 6203
SUNRISE, FL 33323

Current Mailing Address:

4864 RED BRICK RUN
LAKE FOREST, FL 32771

New Mailing Address:

12460 NW 15TH STREET
APT. 6203
SUNRISE, FL 33323

FEI Number: 20-0565650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVAREZ, MARCELINO
4864 RED BRICK RUN
LAKE FOREST, FL 32771 US

Name and Address of New Registered Agent:

ALVAREZ, MARCELINO
12460 NW 15TH STREET
APT. 6203
SUNRISE, FL 33323 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: _____

Electronic Signature of Registered Agent

04/29/2008

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALVAREZ, MARCELINO
Address: 4864 RED BRICK RUN
City-St-Zip: LAKE FOREST, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALVAREZ, MARCELINO
Address: 12460 N.W. 15TH STREET
City-St-Zip: SUNRISE, FL 33323

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: MARCELINO ALVAREZ

DIR

04/29/2008

Electronic Signature of Signing Officer or Director

Date