

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000035159

Entity Name: ALVILU GROUP CORP.

FILED
Apr 11, 2006
Secretary of State

Current Principal Place of Business:

1865 N.E. 79 ST.
NORTH BAY VILLAGE, FL 33141

New Principal Place of Business:

1865 N.E. 79 ST.
AP 16 I
NORTH BAY VILLAGE, FL 33141

Current Mailing Address:

1865 N.E. 79 ST.
NORTH BAY VILLAGE, FL 33141

New Mailing Address:

1865 N.E. 79 ST.
AP 16 I
NORTH BAY VILLAGE, FL 33141

FEI Number: 34-1982623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORCHON, ALBERTO
1966 NE 147TH TERRACE
NORTH MIAMI, FL 33187 US

Name and Address of New Registered Agent:

MORCHON, ALBERTO
1865 NE 79 ST
AP 16 I
NORTH BAY VILLAGE, FL 33141 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:

04/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORCHON, ALBERTO
Address: 1966 NE 147TH TERRACE
City-St-Zip: NORTH MIAMI, FL 33181

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORCHON, ALBERTO
Address: 1865 NE 79 ST
City-St-Zip: NORTH BAY VILLAGE, FL 33141

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: ALBERTO MORCHON

P

04/11/2006

Electronic Signature of Signing Officer or Director

Date