

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90014 028 ***150.00

DOCUMENT # P04000063134 1. Entity Name ALVAREZ ALUMINUM FENCE CREATIONS, INC.					
Principal Place of Business 1004 LEE ST LEESBURG, FL 34748 US			Mailing Address 1004 LEE ST LEESBURG, FL 34748 US		
2. Principal Place of Business - No P.O. Box # 2315 Griffin		3. Mailing Address Suite 5 Rd			
Suite, Apt. #, etc. Suite 5 Rd		Suite, Apt. #, etc. 			
City & State Leesburg, FL		City & State 			
Zip 34748		Country Lake		Zip 	
Country 		Country 			
4. FEI Number 20-0941605			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ALVAREZ, SAUL E 33241 FAIRWAY RD LEESBURG, FL 34788			7. Name and Address of New Registered Agent Name Saul E Alvarez Street Address (P.O. Box Number is Not Acceptable) 935 Belle Oak DR City Leesburg FL Zip Code 34748		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ALVAREZ, SAUL E 935 BELLE OAK DR LEESBURG, FL 34748	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST ALVAREZ, LAURIE K 935 BELLE OAK DR LEESBURG, FL 34748	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP ALVAREZ, RUDDY 1004 LEE ST LEESBURG, FL 34748	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Alvarez, Elizabeth M. 1004 Lee St. Leesburg, FL 34748	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Ruddy Alvarez</u> 352-3216-4480 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					