

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064441

Entity Name: MARLENE ALON, INC.

FILED  
Jul 05, 2006  
Secretary of State

## Current Principal Place of Business:

9070 KIMBERLY BLVD, STE 19  
BOCA RATON, FL 33434

## New Principal Place of Business:

## Current Mailing Address:

9070 KIMBERLY BLVD, STE 19  
BOCA RATON, FL 33434

## New Mailing Address:

FEI Number: 54-2150904

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FREEMAN, DENNIS B  
20801 BISCAYNE BLVD  
STE 304  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

ALMAN, MARTIN H  
17290 N.E. 19TH AVENUE  
NORTH MIAMI BEACH, FL 33162 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: MARTIN H. ALMAN

07/05/2006

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: D ( ) Delete  
Name: ALON, ABRAHAM  
Address: 9070 KIMBERLY BLVD, STE 19  
City-St-Zip: BOCA RATON, FL 33434

Title: D ( ) Delete  
Name: ALON, MARLENE  
Address: 9070 KIMBERLY BLVD, STE 19  
City-St-Zip: BOCA RATON, FL 33434

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: ALON, ABRAHAM  
Address: 9070 KIMBERLY BLVD, STE 19  
City-St-Zip: BOCA RATON, FL 33434

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ABRAHAM ALON

PRES

07/05/2006

Electronic Signature of Signing Officer or Director

Date