

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000096074

Entity Name: ALAAR CORPORATION

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

11825 S.W. 73RD AVENUE
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

11825 S.W. 73RD AVENUE
MIAMI, FL 33156

New Mailing Address:

FEI Number: 20-2970023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIN, MARIA I
11825 S.W. 73RD AVENUE
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUQUE-ESTRADA, ALVARO
Address: 13075 SW 132 AVE
City-St-Zip: MIAMI, FL 33186

Title: T () Delete
Name: CHAMORRO, ARTURO J
Address: 8603 SOUTH DIXIE HWY, SUITE 217-A
City-St-Zip: MIAMI, FL 33143

Title: S () Delete
Name: MARIN, ARIEL J
Address: 11825 S.W. 73RD AVENUE
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: MARIN, MARIA I
Address: 11825 S.W. 73RD AVENUE
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: CHAMORRO, ROSARIO D
Address: 8603 SOUTH DIXIE HWY, SUITE 217-A
City-St-Zip: MIAMI, FL 33143

Title: D () Delete
Name: DUQUE-ESTRADA, PATRICIA
Address: 15425 SW 114TH STREET
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: ALVARO DUQUE-ESTRADA

PD

03/24/2009

Electronic Signature of Signing Officer or Director

Date