2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000111689

MELBOURNE, FL 32902

City-St-Zip:

FILED Apr 17, 2008 Secretary of State

Entity Name: ALCICEK ENTERPRISES, INC. **Current Principal Place of Business: New Principal Place of Business:** 2390 MINTON RD 3290 DAIRY RD WEST MELBOURNE, FL 32904 WEST MELBOURNE, FL 32904 **Current Mailing Address: New Mailing Address:** PO BOX 669 MELBOURNE, FL 32902 FEI Number: 14-1914937 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRIGANDO-ALCICEK, NATALIE F BRIGANDO-ALCICEK, NATALIE F 2390 MINTON RD 3290 DAIRY RD WEST MELBOURNE, FL 32904 WEST MELBOURNE, FL 32904 US 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: 04/17/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BRIGANDO-ALCICEK, NATALIE F Name: Name: PO BOX 669 Address: Address: City-St-Zip: MELBOURNE, FL 32902 City-St-Zip: Title: Title: () Change () Addition () Delete ALCICEK, ZEKI Name: Name: PO BOX 669 Address: 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: NATALIE F. BRIGANDO-ALCICEK DC 04/17/2008 D