

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000139560

Entity Name: ALWOOD REALTY CORP

FILED
Nov 14, 2008
Secretary of State

Current Principal Place of Business:

5567 N STATE RD 7
NORTH LAUDERDALE, FL 33359 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 590698
TAMARAC, FL 33359 US

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESTRE, OCTAVIO E
7385 SW 87 AVENUE
SUITE 100
MIAMI, FL 33173 US

Name and Address of New Registered Agent:

ALIX, SAGET SR.
5567 N STATE RD 7
NORTH LAUDERDALE, FL 33359 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: ALIX SAGET, SR.

11/14/2008

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: P () Delete
Name: SAGET, ALIX SR
Address: 158-24 78 ROAD
City-St-Zip: FLUSHING, NY 11366 US

Title: VP,S () Delete
Name: SAGET, ALIX JR.
Address: PO BOX 590698
City-St-Zip: TAMARAC, FL 33359 US

Title: D () Delete
Name: SAGET, MAYERLING
Address: PO BOX 590698
City-St-Zip: TAMARAC, FL 33359 US

Title: D () Delete
Name: SAGET, MARY
Address: 158-24 78 ROAD
City-St-Zip: FLUSHING, NY 11366

Title: D (X) Delete
Name: MESTRE, OCTAVIO E
Address: 7385 SW 87 AVENUE, #100
City-St-Zip: MIAMI, FL 33173

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:

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: ALIX SAGET, JR.

VP

11/14/2008

Electronic Signature of Signing Officer or Director

Date