

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000008489

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ALVIO CORP

**Current Principal Place of Business:**

21041 NE 34TH PL  
AVENTURA, FL 33180 US

**New Principal Place of Business:**

**Current Mailing Address:**

21041 NE 34TH PL  
AVENTURA, FL 33180 US

**New Mailing Address:**

FEI Number: 20-3443722      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAMPLE, LUIS  
21041 NE 34TH PL  
AVENTURA, FL 33180 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: P ( ) Delete  
Name: PEDERZOLI, BARBARA  
Address: 21041 NE 34TH PL  
City-St-Zip: AVENTURA, FL 33180 US

Title: VP ( ) Delete  
Name: LAMPLE, LUIS  
Address: 21041 NE 34TH PL  
City-St-Zip: AVENTURA, FL 33180 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: VP ( ) Change (X) Addition  
Name: PEDERZOLI, ROBERTO M  
Address: 3330 NE 190 ST TH20  
City-St-Zip: AVENTURA, FL 33180 US

Title: S ( ) Change (X) Addition  
Name: RECCHIUTI, SANDRA  
Address: 3330 NE 190ST TH20  
City-St-Zip: AVENTURA, FL 33180 US

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: BARBARA PEDERZOLI

P

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date