

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098275

FILED
May 25, 2006
Secretary of State

Entity Name: ALROSS, INC.

Current Principal Place of Business:

11135 NW 27TH PLACE
SUNRISE, FL 33322

New Principal Place of Business:

1132 CEDAR FALLS DR
WESTON, FL 33327

Current Mailing Address:

11135 NW 27TH PLACE
SUNRISE, FL 33322

New Mailing Address:

1132 CEDAR FALLS DR
WESTON, FL 33327

FEI Number: 32-0161250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RAMIREZ, XIMENA
11135 NW 27TH PLACE
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

RAMIREZ, XIMENA
1132 CEDAR FALLS DR
WESTON, FL 33327 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: XIMENA RAMIREZ

05/25/2006

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: P () Delete
Name: GOMEZ, ROSA
Address: 11135 NW 27TH PLACE
City-St-Zip: SUNRISE, FL 33322

Title: V () Delete
Name: GOMEZ, ALBERTO
Address: 11135 NW 27TH PLACE
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOMEZ, ROSA
Address: 1132 CEDAR FALLS DR
City-St-Zip: WESTON, FL 33327

Title: VP (X) Change () Addition
Name: RAMIREZ, ALBERTO
Address: 1132 CEDAR FALLS DR
City-St-Zip: WESTON, FL 33327

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: ALBERTO RAMIREZ

VP

05/25/2006

Electronic Signature of Signing Officer or Director

Date