2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P05000149593 1. Entity Name ALSV, INC. Principal Place of Business Mailing Address BOX 291438 3520 SW 50TH TERRACE FORT LAUDERDALE, FL 33329-1438 DAVIE, FL 33329

FILED Apr 07, 2008 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

04022008 No Chg-P CR2E034 (11/05)

74-3153561

4. FEI Number

Applied For Not applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

954.316.46.25

TOLCHIN, RICHARD 3520 SW 50TH TERRACE

FORT LAUDERDALE, FL 33314

SIGNATURE:

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Trust Fund Contribu				\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		•	Lingermanners
NAME STREET ADDRESS CITY-ST-ZIP	D TOLCHIN, RICHARD 3520 SW 50TH TERRACE FORT LAUDERDALE, FL 33314				000000886317 04/18/08-80051-012 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT WRITE
HTLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					İ
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with a didners, with all other like empowered					