

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000017143

FILED
Feb 06, 2007
Secretary of State

Entity Name: A&R ALCORTA & ROSALES DESIGN GROUP, INC.

Current Principal Place of Business:

2917 NW 82ND AVE
MIAMI, FL 33122

New Principal Place of Business:

3803 ESTEPONA AVE
DORAL, FL 33178 US

Current Mailing Address:

2917 NW 82ND AVE
MIAMI, FL 33122

New Mailing Address:

3803 ESTEPONA AVE
DORAL, FL 33178

FEI Number: 20-4257568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ, ALEX
354 SEVILLA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

ALCORTA, ADOLFO P
3803 ESTEPONA AVE
DORAL, FL 33178 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: ADOLFO ALCORTA

02/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALCORTA, ADOLFO
Address: 2917 NW 82ND AVE
City-St-Zip: MIAMI, FL 33122

Title: VP () Delete
Name: ROSALES, MARIA
Address: 2917 NW 82ND AVE
City-St-Zip: MIAMI, FL 33122

Title: S () Delete
Name: ALCORTA, MARIA
Address: 2917 NW 82ND AVE
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALCORTA, ADOLFO P
Address: 3803 ESTEPONA AVE
City-St-Zip: DORAL, FL 33178

Title: VP (X) Change () Addition
Name: ROSALES, MARIA A
Address: 3803 ESTEPONA AVE
City-St-Zip: DORAL, FL 33178

Title: S (X) Change () Addition
Name: ALCORTA, MARIA A
Address: 3803 ESTEPONA AVE
City-St-Zip: DORAL, FL 33178

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: ADOLFO ALCORTA

P

02/06/2007

Electronic Signature of Signing Officer or Director

Date