

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000080821

FILED
Apr 17, 2009
Secretary of State

Entity Name: A.L. SCREENING ENTERPRISES, INC.

Current Principal Place of Business:

3209 40TH STREET SW
LEHIGH ACRES, FL 33971

New Principal Place of Business:

702 CENTER LAKES STREET
LEHIGH ACRES, FL 33974

Current Mailing Address:

POST OFFICE BOX 1926
IMMOKALEE, FL 34143

New Mailing Address:

FEI Number: 16-1763713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPOS, ADA
3209 40TH ST. SW.
LEHIGH ACRES, FL 33971 US

Name and Address of New Registered Agent:

CAMPOS, ADA
702 CENTER LAKES STREET
LEHIGH ACRES, FL 33974 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: ADA CAMPOS

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SALDIVAR, LEROY
Address: 3209 40TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

Title: D () Delete
Name: CAMPOS, ADA
Address: 3209 40TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SALDIVAR, LEROY
Address: 702 CENTER LAKES STREET
City-St-Zip: LEHIGH ACRES, FL 33974

Title: D (X) Change () Addition
Name: CAMPOS, ADA
Address: 702 CENTER LAKES STREET
City-St-Zip: LEHIGH ACRES, FL 33974

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: LEROY SALDIVAR

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date