

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000037270

Entity Name: SANTA FLORA ALF, INC

FILED  
Jan 05, 2009  
Secretary of State

## Current Principal Place of Business:

19005 SW 320 STREET  
HOMESTEAD, FL 33030

## New Principal Place of Business:

## Current Mailing Address:

19005 SW 320 STREET  
HOMESTEAD, FL 33030

## New Mailing Address:

FEI Number: 20-8693963

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ONE STOP SHOP ENTERPRISES INC  
10961 SW 186 STREET  
CUTLER BAY, FL 33157 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: LLOPIZ, RAMON  
Address: 24201 SW 192 AVE  
City-St-Zip: HOMESTEAD, FL 33031 US

Title: S/T ( ) Delete  
Name: QUINTANA, LYUVIA  
Address: 24201 SW 192 AVE  
City-St-Zip: HOMESTEAD, FL 33031 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: QUINTANA, ALBERTO  
Address: 24201 SW 192 AVE  
City-St-Zip: HOMESTEAD, FL 33031 US

Title: S/T (X) Change ( ) Addition  
Name: QUINTANA, ALEIDA  
Address: 24201 SW 192 AVE  
City-St-Zip: HOMESTEAD, FL 33031 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: ALBERTO QUINTANA

P

01/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date