

2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Dec 04, 2008
Secretary of State**

DOCUMENT# P07000077180

Entity Name: THE ALSTON GROUP INC.

Current Principal Place of Business:

8620 NORTHWEST 48TH STREET
FORT LAUDERDALE, FL 33351

New Principal Place of Business:

110 E BROWARD BLVD
1700
FORT LAUDERDALE, FL 33301

Current Mailing Address:

8620 NORTHWEST 48TH STREET
FORT LAUDERDALE, FL 33351

New Mailing Address:

FEI Number: 26-0479009 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: TIM HEELY

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: PD () Delete
Name: ALSTON, COREY
Address: 8620 NORTHWEST 48TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: S () Delete
Name: ALSTON, LOUIS
Address: 8620 NORTHWEST 48TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: T () Delete
Name: ALSTON, TOREY
Address: 8620 NORTHWEST 48TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: COREY ALSTON

PD

12/04/2008

Electronic Signature of Signing Officer or Director

Date