

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097259

FILED
May 08, 2008
Secretary of State

Entity Name: ALFONSO'S FAMILY SERVICES, CORP.

Current Principal Place of Business:

782 NW 136TH AVE
MIAMI, FL 33182

New Principal Place of Business:

2450 SW 137 AVE
236
MIAMI, FL 33175

Current Mailing Address:

782 NW 136TH AVE
MIAMI, FL 33182

New Mailing Address:

2450 SW 137 AVE
236
MIAMI, FL 33175

FEI Number: 26-0839475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALFONSO, OCTAVIO M
782 NW 136TH AVE
MIAMI, FL 33182 US

Name and Address of New Registered Agent:

ALFONSO, OCTAVIO M
2450 SW 137 AVE
236
MIAMI, FL 33175 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: OCTAVIO ALONSO

05/08/2008

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: DP () Delete
Name: ALFONSO, OCTAVIO M
Address: 782 NW 136TH AVE
City-St-Zip: MIAMI, FL 33182

Title: DVP () Delete
Name: FERNANDEZ, ALINA C
Address: 782 NW 136TH AVE
City-St-Zip: MIAMI, FL 33182

Title: DS () Delete
Name: ALFONSO, CLAUDIA M
Address: 782 NW 136TH AVE
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: ALFONSO, OCTAVIO M
Address: 2450 SW 137 AVE STE 236
City-St-Zip: MIAMI, FL 33175

Title: VP (X) Change () Addition
Name: GUTIERREZ, FRANCISCO
Address: 2450 SW 137 AVE STE 236
City-St-Zip: MIAMI, FL 33175

Title: ST (X) Change () Addition
Name: FERNANDEZ, ALINA
Address: 2450 SW 137 AVE STE 236
City-St-Zip: MIAMI, FL 33175

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: OCTAVIO ALONSO

P

05/08/2008

Electronic Signature of Signing Officer or Director

Date