

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000004982

Entity Name: P & F ALIVE, CORPORATION

FILED
Aug 26, 2009
Secretary of State

Current Principal Place of Business:

5613 SOUTH TRAVELERS PALM LANE
TAMARAC, FL 33319

New Principal Place of Business:

Current Mailing Address:

5613 SOUTH TRAVELERS PALM LANE
TAMARAC, FL 33319

New Mailing Address:

FEI Number: 26-1752611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTEGA SOLUTIONS, INC
1943 SW 8 STREET
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

FARIAS PAMELA
5613 SOUTH TRAVELERS PALM LANE
TAMARAC, FL 33319 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: PAMELA FARIAS

08/26/2009

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: P () Delete
Name: PASTEN, PAMELA
Address: 5613 SOUTH TRAVELERS PALM LANE
City-St-Zip: TAMARAC, FL 33319

Title: VP () Delete
Name: FARIAS, MARIO
Address: 5613 SOUTH TRAVELERS PALM LANE
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: FARIAS, PAMELA
Address: 5613 SOUTH TRAVELERS PALM LANE
City-St-Zip: TAMARAC, FL 33319

Title: VPD (X) Change () Addition
Name: FARIAS, MARIO
Address: 5613 SOUTH TRAVELERS PALM LANE
City-St-Zip: TAMARAC, FL 33319

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: PAMELA FARIAS

PDT

08/26/2009

Electronic Signature of Signing Officer or Director

Date