## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000041261

Entity Name: ALPHALOG CORPORATION

DORAL, FL 331783773

City-St-Zip:

FILED Feb 06, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
1825 NW 112 AVE., #152 MIAMI, FL 33172 US					
Current Mailing Address:			New Mailing Address:		
1825 NW 112 AVE., #152 MIAMI, FL 33172 US					
FEI Number:	26-2473197	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
FERREIRA 1825 NW 1 MIAMI, FL	12 AVE., #	, NADIA MARIA 152 JS			
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:					
3.3		ronic Signature of Registered Agent	•	 Date	
Election Campaign Financing Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:		()Delete NADIA MARIA F 12 AVE., #152 33172 US	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:		()Delete GUILHERME F 12 AVE., #152 33172 US	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:		()Delete ROBSON JOSE 12 AVE., #152 33172 US	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	D FERREIRA, 10750 NW 6	()Delete MARLUZ A 66TH STREET -APT 202B	Title: ( Name: Address:	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: NADIA MARIA F DA SILVA P 02/06/2009