

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000061868

FILED
Apr 17, 2009
Secretary of State

Entity Name: CASA SALCINES A.L.F. II, INC.

Current Principal Place of Business:

8911 SW 157TH STREET
PALMETTO BAY, FL 331571937 US

New Principal Place of Business:

Current Mailing Address:

8911 SW 157TH STREET
PALMETTO BAY, FL 331571937 US

New Mailing Address:

FEI Number: 26-2874596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALCINES JAFFE, BERTA
8911 SW 157TH STREET
PALMETTO BAY, FL 331571937 US

Name and Address of New Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC.
2121 PONCE DE LEON BLVD.
SUITE 1050
CORAL GABLES, FL 33134 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: ANTONIO GARCIA

04/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,S () Delete
Name: SALCINES JAFFE, BERTA
Address: 8911 SW 157TH STREET
City-St-Zip: PALMETTO BAY, FL 331571937 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: SALCINES JAFFE, BERTA
Address: 8911 SW 157TH STREET
City-St-Zip: PALMETTO BAY, FL 331571937 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: BERTA SALCINES JAFFE

PS

04/17/2009

Electronic Signature of Signing Officer or Director

Date