

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000094896

Entity Name: ALFA BILLING CORP.

FILED
Dec 02, 2009
Secretary of State

Current Principal Place of Business:

940 SW 154 PATH
MIAMI, FL 33194

New Principal Place of Business:

Current Mailing Address:

940 SW 154 PATH
MIAMI, FL 33194

New Mailing Address:

FEI Number: 26-3596102

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAZO, JACQUELINE
940 SW 154 PATH
MIAMI, FL 33194 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: JACQUELINE LAZO

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: LAZO, JACQUELINE
Address: 940 SW 154 PATH
City-St-Zip: MIAMI, FL 33194

Title: ST () Delete
Name: SOSA, BARBARA
Address: 2654 W 60 ST
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JACQUELINE LAZO

Electronic Signature of Signing Officer or Director

PRES

12/02/2009

Date