

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000009085

Entity Name: CHARLES ALFIERI, INC.

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

4390 N FEDERAL HWY
SUITE 203
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

4390 N FEDERAL HWY
SUITE 203
FT LAUDERDALE, FL 33308

New Mailing Address:

3100 N. OCEAN BLVD.
APT. # 2307
FT LAUDERDALE, FL 33308

FEI Number: 65-0389256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALFIERI, CHARLES
4390 N FEDERAL HWY
SUITE 203
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

ALFIERI, CHARLES
3100 N. OCEAN BLVD.
APT. # 2307
FT LAUDERDALE, FL 33308 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: ALFIERI, CHARLES
Address: 4390 N FEDERAL HWY #203
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: ALFIERI, CHARLES
Address: 3100 N. OCEAN BLVD., APT. # 2307
City-St-Zip: FT LAUDERDALE, FL 33308

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: CHARLES ALFIERI

PVST

04/21/2009

Electronic Signature of Signing Officer or Director

Date