

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P950000 22320**

1. Entity Name

ALF. INTERNATIONAL, INC.

5:

FILED
May 12, 2001 8:00 am
Secretary of State

05-12-2001 90034 017 ***150.00

Principal Place of Business

Mailing Address

7419 NW 54 Street

Miami, FL 33166

5220 NW 72nd

Miami

331 00052934

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0566401

Applied For

Not Applicable

Zip

Country

Zip

Country

6. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

Alfredo Pineros

13344 SW 102 Terrace

Miami, FL 33186

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	Alfredo Pineros	
STREET ADDRESS	13344 SW 102 Terrace	
CITY-ST-ZIP	Miami, FL 33186	

TITLE	SD	☐ Delete
NAME	Piedad Franky	
STREET ADDRESS	13344 SW 102 Terrace	
CITY-ST-ZIP	Miami, FL 33186	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment to an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature: Pineros

CR2034 (11/00)