

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000029360

**FILED**  
**Feb 18, 2009**  
**Secretary of State**

**Entity Name:** ALBERTO ENTERPRISES OF DADE COUNTY, INC.

**Current Principal Place of Business:**

7537 W 5TH LN  
HIALEAH, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

7537 W 5TH LN  
HIALEAH, FL 33014

**New Mailing Address:**

**FEI Number:** 65-0740871      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GONZALEZ, ALBERTO M  
7537 2 5TH LN  
HIALEAH, FL 33014    US

**Name and Address of New Registered Agent:**

GONZALEZ, ALBERTO M  
7537 W 5TH LN  
HIALEAH, FL 33014    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: ALBERTO GONZALEZ

02/18/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title:            DPS            ( ) Delete  
Name:            GONZALEZ, ALBERTO  
Address:        7537 W 5TH LN  
City-St-Zip:    HIALEAH, FL 33014

Title:            S                ( ) Delete  
Name:            GONZALEZ, IRMA N.  
Address:        7537 W. 5TH LANE  
City-St-Zip:    HIALEAH, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            DPS            (X) Change ( ) Addition  
Name:            GONZALEZ, ALBERTO M  
Address:        7537 W 5TH LN  
City-St-Zip:    HIALEAH, FL 33014

Title:            S                (X) Change ( ) Addition  
Name:            GONZALEZ, IRMA N  
Address:        7537 W. 5TH LANE  
City-St-Zip:    HIALEAH, FL

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: ALBERTO GONZALEZ

DPS

02/18/2009

Electronic Signature of Signing Officer or Director

Date