

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000058123

FILED
Apr 20, 2009
Secretary of State

Entity Name: ASSISTED LIVING MANAGEMENT GROUP, INC.

Current Principal Place of Business:

2787-89 SW 33 AVENUE
MIAMI, FL 33133

New Principal Place of Business:

Current Mailing Address:

2151 SW 24 TERR
MIAMI, FL 33145

New Mailing Address:

2787-89 SW 33 AVENUE
MIAMI, FL 33133

FEI Number: 65-0595930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DUASSO, INGRID
2151 SW 24 TERR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

DUASSO, INGRID PD
2151 SW 24 TERR
MIAMI, FL 33145 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: INGRID DUASSO

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUASSO, INGRID M
Address: 2151 SW 24 TERRACE
City-St-Zip: MIAMI, FL 33145

Title: VP () Delete
Name: DUASSO, JOSE L
Address: 2151 SW 24 TERRACE
City-St-Zip: MIAMI, FL 33145

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: INGRID DUASSO

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date