

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000047703

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** ALAR-VER PROPERTIES, INC.

**Current Principal Place of Business:**

6039 COLLINS AVE APT.737  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 402694  
MIAMI BEACH, FL 33140 US

**New Mailing Address:**

**FEI Number:** 65-0676329      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ALARCON, HECTOR  
6039 COLLINS APT 737  
MIAMI BEACH, FL 33140 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

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

**OFFICERS AND DIRECTORS:**

**Title:** PSD  
**Name:** ALARCON, HECTOR  
**Address:** 6039 COLLINS AVE APT 737  
**City-St-Zip:** MIAMI BEACH, FL 33140

**Title:** VP  
**Name:** RUIZ, HUGO N  
**Address:** 6039 COLLINS AVE APT 737  
**City-St-Zip:** MIAMI BEACH, FL 33140

I hereby 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 all other like empowered.

**SIGNATURE:** HECTOR ALARCON

PSD

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date