2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P9700003883

Mr. Bakersh.

1. Entity Name

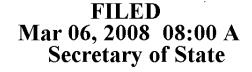
ALAS REALTY INVESTMENTS, INC.



Principal Place of Business

317 71ST STREET MIAMI BEACH, FL 33141 Mailing Address

317 71ST STREET MIAMI BEACH, FL 33141





DO NOT WRITE IN THIS SPACE

02282008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3500271

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIOTRKOWSKI, JOEL S 317 71ST STREET MIAMI BEACH, FL 33141

DO NOT WRITE IN THIS SPACE

_				有限性 经基金额债券 二字	
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 1 am familiar with, and accept the obligations of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent and title if	apolicable. (NOTE: Reossierer	d Agent signature required when reinstaling)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.		scing \$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS	1		
TITLE	PD		A SECTION OF THE SECT		
NAME	LIEBERMAN, AARON				
STREET ADDRESS	1				to the state of
CITY-ST-ZIP	MIAMI BEACH, FL 33141		Para Maria		
TITLE	VSD			000000849498	* 10 * 10 * 10 * 10 * 10 * 10 * 10 * 10
NAME	FARBSTEIN, EVELYN			03/21/08-80023-01	1 150.00
STREET ADDRESS CITY-ST-ZIP	s 317 71ST STREET MIAMI BEACH, FL 33141			00/21/00/00020 01	1 130.00
	MIAMI BEACH, FL 33141			i	**
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NAME					117
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CITY-ST-ZIP	·	•		*.	·

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment/fixed has address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB. 28, 2008 (574) 387-7