

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000051260

FILED  
Jun 16, 2009  
Secretary of State

Entity Name: STRATEGIC ALLIANCE PARTNERS CORP.

## Current Principal Place of Business:

1250 E HALLANDALE BEACH BLVD  
SUITE 707  
HALLANDALE, FL 33009

## New Principal Place of Business:

2627 IVES DAIRY ROAD  
SUITE 100  
AVENTURA, FL 33180

## Current Mailing Address:

1250 E HALLANDALE BEACH BLVD  
SUITE 707  
HALLANDALE, FL 33009

## New Mailing Address:

2627 IVES DAIRY ROAD  
SUITE 100  
AVENTURA, FL 33180

FEI Number: 65-0775249

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHILLIPS, GARY S ESQ.  
4000 HOLLYWOOD BLVD  
SUITE 375-SOUTH  
HOLLYWOOD, FL 33021 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BARRON, GARY A PRES  
Address: 1250 E HALLANDALE BCH BLVD #707  
City-St-Zip: HALLANDALE BEACH, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BARRON, GARY A PRES  
Address: 2627 IVES DAIRY ROAD, SUITE 100  
City-St-Zip: AVENTURA, FL 33180

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: GARY A. BARRON

PRES

06/16/2009

Electronic Signature of Signing Officer or Director

Date