

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000031437

Entity Name: ALFONSO CORP.

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

10450 SOUTHWEST 4TH STREET
MIAMI, FL 33174

New Principal Place of Business:

10300 SW 130 AVENUE
MIAMI, FL 33186

Current Mailing Address:

10450 SOUTHWEST 4TH STREET
MIAMI, FL 33174

New Mailing Address:

10300 SW 130 AVENUE
MIAMI, FL 33186

FEI Number: 59-1741797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALCINES, ALFONSO
10450 SOUTHWEST 4TH STREET
MIAMI, FL 33174 US

Name and Address of New Registered Agent:

SALCINES, ALFONSO
10300 SW 130 AVENUE
MIAMI, FL 33186 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:

04/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SALCINES, ALFONSO
Address: 10450 SOUTHWEST 4TH STREET
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SALCINES, ALFONSO
Address: 10300 SW 130 AVENUE
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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: ALFONSO SALCINES

PRES

04/18/2007

Electronic Signature of Signing Officer or Director

Date