


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90262 001 ***300.00

DOCUMENT # P98000059744 1. Entity Name ALVNOR CO.	
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Principal Place of Business 3600 N.W. 37 COURT MIAMI, FL 33142 US	Mailing Address 3600 N.W. 37 COURT MIAMI, FL 33142 US
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66009584



04052006 No Chg-P CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent GOMEZ, ALVARO 3600 N.W. 37 COURT MIAMI, FL 33142

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GOMEZ, ALVARO 3600 N.W. 37TH COURT MIAMI, FL 33147
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CORREDOR, NORA 3600 NW 37 COURT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUELA, ALEJANDRO 3600 NW 37 COURT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUELA, ADRIAN 3600 NW 37 COURT MIAMI, FL 33142
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 with an address, with all other like empowered.

SIGNATURE: Noa Canedo 4/5/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #