

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000067208

FILED  
Apr 15, 2010  
Secretary of State

Entity Name: ALUCOAST, INC.

**Current Principal Place of Business:**

4156 N.W. 132 ST.  
OPA LOCKA, FL 33054 US

**New Principal Place of Business:**

**Current Mailing Address:**

4156 N.W. 132 ST.  
OPA LOCKA, FL 33054 US

**New Mailing Address:**

FEI Number: 65-0854488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JARAMILLO, JAIRO  
4156 N.W. 132 ST.  
OPA LOCKA, FL 33054 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: PD  
Name: ANGULO, JORGE  
Address: 4156 N.W. 132 ST.  
City-St-Zip: OPA LOCKA, FL 33054

Title: VPD  
Name: ANGULO, BEATRIZ  
Address: 4156 N.W. 132 ST  
City-St-Zip: OPA LOCKA, FL 33054

Title: SD  
Name: ANGULO, MAGALY  
Address: 4156 N. W. 132 ST.  
City-St-Zip: OPA LOCKA, FL 33054

Title: TR  
Name: JARAMILLO, JAIRO  
Address: 4156 N. W. 132 ST.  
City-St-Zip: OPA LOCKA, FL 33054

Title: COO  
Name: JARAMILLO, GISELLA  
Address: 4156 N. W. 132 ST.  
City-St-Zip: OPA LOCKA, FL 33054

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: JORGE ANGULO

PD

04/15/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date