2007 FOR PROFIT CORPORATION

FILED Jan 29, 2007 08:00 AM

ANNUAL REPORT				Secretary of State			
DOCUMENT # P98000073181 1. Entity Name ALEX BAIL BONDS INC.					5001	ctary of	
Principal Place 1883 NW 7 : MIAMI, FL 3		Mailing Address 1883 NW 7 STREET MIAMI, FL 33125 US		} } } } } }	M 2000 (100) Major Major Major Major	1881) 1888 1888 1888 1	RANGO ROMANTO DE DESERVI
C	OO NOT WRITE		CE	01232007 4. FEI Numb 65-086		CR2E034 (11	··
E103 MIAMI, FL	7 62 STREET . 33183	DO NOT WRITE IN THIS SPACE					
	e named entity submits this statement for the tions of registered agent. Signature, typed or printed name of registered agent and		red office or registe	<u> </u>	th, in the State of Flo	orida. I am familiar	with, and accept
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution	incling \$5	.00 May Be led to Fees	U00000 01/31/07-	608202 80067-023	150.00
ITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BORNOTE, ALEJANDRO 1883 NW 7 STREET #4 MIAMI, FL 33125	RECTORS			NOT W		
STREET ADDRESS							

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 ceth; 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 appendiress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Designing Proofe #

IIILE NAME STREET ADDRESS