


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 11, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # P98000106112  
 1. Entity Name  
 325 ALCAZAR HOLDING CORP.



Principal Place of Business      Mailing Address  
 7051 SW 12TH      7051 SW 12TH  
 MIAMI, FL 33144      MIAMI, FL 33144

**DO NOT WRITE IN THIS SPACE**



02062008    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
 65-0888209      Not Applicable

5. Certificate of Status Desired        \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 MURAI, WALD, BIONDO & MORENO, P.A.  
 900 INGRAHAM BUILDING  
 25 SOUTHEAST 2ND AVENUE  
 MIAMI, FL 33131

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

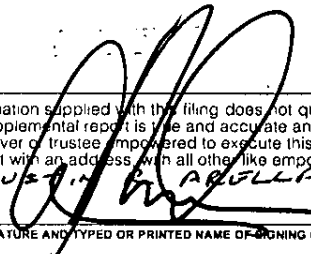
10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ARELLANO, AGUSTIN N
STREET ADDRESS	7051 SW 12TH ST
CITY- ST- ZIP	MIAMI, FL 33144
TITLE	S
NAME	ARELLANO, MARIA
STREET ADDRESS	7051 SW 12TH ST
CITY- ST- ZIP	MIAMI, FL 33144
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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 02/20/08-80022-012 158.75

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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:       2/7/08    305-994 9901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #