## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000009750

Entity Name: ALONSO & GARCIA, P.A.

FILED Apr 07, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5805 BLUE LAGOON DR. SUITE 200 MIAMI, FL 33126

**New Mailing Address: Current Mailing Address:** 

5805 BLUE LAGOON DR. SUITE 200 MIAMI, FL 33126

FEI Number: 65-0894734 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AG CORPORATE SERVICES, LLC AG CORPORATE SERVICES, LLC 300 SEVILLA AVE STE 201 5805 BLUE LAGOON DRIVE CORAL GABLES, FL 33134 US 200 MIAMI, FL 33126 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: AG CORPORATE SERVICES,LLC 04/07/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition ALONSO, DOMINGO ALONSO, DOMINGO Name: Name:

300 SEVILLA AVE STE 201 5805 BLUE LAGOON DRIVE, SUITE200 Address: Address:

CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: MIAMI, FL 33126 US

VD Title: VD Title: () Delete (X) Change ( ) Addition

Name: ALONSO, PILAR Name: ALONSO, PILAR

300 SEVILLA AVE STE 201 5805 BLUE LAGOON DRIVE SUITE200 Address: Address: CORAL GABLES, FL 33134

MIAMI, FL 33126 US City-St-Zip: City-St-Zip:

Title: Title: (X) Change ( ) Addition SD ( ) Delete SD GARCIA, JULIO GARCIA, JULIO Name: Name:

300 SEVILLA AVE STE 201 5805 BLUE LAGOON DRIVE SUITE200 Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33126 US

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: DOMINGO ALONSO PD 04/07/2007