

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S35609

Entity Name: ALEKLA, INC.

FILED  
Jan 29, 2009  
Secretary of State

## Current Principal Place of Business:

C/O 1500 SAN REMO AVE.  
SUITE 125  
CORAL GABLES, FL 33146

## New Principal Place of Business:

## Current Mailing Address:

C/O 1500 SAN REMO AVE.  
SUITE 125  
CORAL GABLES, FL 33146

## New Mailing Address:

FEI Number: 22-3222038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVENUE, STE 125  
CORAL GABLES, FL 33146 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 ( ) Delete  
Name: STRANSKY, ALEXANDER  
Address: 2600 ISLAND BLVD, #1405  
City-St-Zip: AVENTURA, FL 33160

Title: STD ( ) Delete  
Name: STRANSKY, CLARA  
Address: 2600 ISLAND BLVD, #1405  
City-St-Zip: AVENTURA, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ALEXANDER STRANSKY

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date