2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S73685

FILED May 19, 2005 Secretary of State

| Entity Nai | me: ALSAR (| CONSTRUCTION, CORP | | | |
|---|---|---------------------------------------|---|--|--|
| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
| | BULA AVENUE ABLES, FL 33 | | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| | BULA AVENUE ABLES, FL 33 | | | | |
| FEI Number: | : 65-0283741 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| SALAZAR 2040 NE 1 NO MIAMI | | 33179 US | SALAZAR, ALVARO 410 CALIGULA AVE CORAL GABLES, FL | 33146 US | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registere | d office or registered agent, or both, | |
| SIGNATURE: | | | | 05/19/2005 | |
| | Electro | nic Signature of Registered Ag | ent | Date | |
| | | 3(2)(b), F.S., the corporation did no | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGI | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD (SALAZAR, AL\ 410 CALIGULA CORAL GABLI | AVENUE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | SD (SALAZAR, RO 410 CALIGULA CORAL GABLE | AVENUE | Title: Name: Address: City-St-Zip: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SALAZAR, ALVARO PD 05/19/2005