	Name and Address of Current 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:	SIGNATURE: IRENA SIRUCEK			04/16/2015	
		Electronic Signature of Registered Agent			Date	
Officer/Director Detail :						
	Title	VP	Title	Р		
	Name	SIRUCEK, IRENA	Name	SIRUCEK, JIRI		
	Address	955 STARLING DR.	Address	955 STARLING DR.		
	City-State-Zip:	CELEBRATION FL 34747	City-State-Zip:	CELEBRATION FL 34747		

955 STARLING DR. CELEBRATION. FL 34747 US

DOCUMENT# P1000008884

955 STARLING DR. CELEBRATION, FL 34747

Entity Name: ALFA WEAPON'S CO.

Current Principal Place of Business:

FEI Number: 27-1800118

Current Mailing Address:

Name and Address of Current Registered Agent:

I hereby 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 all other like empowered. Ρ

SIGNATURE: JIRI SIRUCEK

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/16/2015

Date

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT