

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000061677

Entity Name: ALFASPIRE INC.

Current Principal Place of Business:

3936 CASCADE TERRACE
WESTON, FL 33332

Current Mailing Address:

3936 CASCADE TERRACE
WESTON, FL 33332 US

FEI Number: 47-1430064

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JARAMILLO, BRESLY
3936 CASCADE TERRACE
WESTON, FL 33332 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DPT
Name JARAMILLO, BRESLY
Address 3936 CASCADE TERRACE
City-State-Zip: WESTON FL 33332

Title DS
Name JARAMILLO, CARLA
Address 3936 CASCADE TERRACE
City-State-Zip: WESTON FL 33332

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.

SIGNATURE: BRESLY JARAMILLO

DIRECTOR

01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date