

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089659

**FILED**  
**Mar 22, 2007**  
**Secretary of State**

**Entity Name:** ALPHA INVESTMENT ACQUISITIONS, LLC

**Current Principal Place of Business:**

P. O. BOX 622036  
OVIDO, FL 32762

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 622036  
OVIDO, FL 32762

**New Mailing Address:**

FEI Number: 20-3445017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DYCE, JIM  
2111 E. MICHIGAN ST  
130  
ORLANDO, FL 32806 US

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

PARDO, VI  
3888 HEIRLOOM ROSE PLACE  
OVIDO, FL 32766 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: VI PARDO

03/22/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PARDO, STEVEN  
Address: P.O. BOX 622036  
City-St-Zip: OVIDO, FL 32762

Title: MGR ( ) Delete  
Name: PARDO, VIMARIE  
Address: P.O. BOX 622036  
City-St-Zip: OVIDO, FL 32762

**ADDITIONS/CHANGES:**

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: VI PARDO

MGR

03/22/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date