2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106624

FILED Jan 25, 2007 Secretary of State

Entity Name: ALPHA NY 2, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 600					
FORTLAL	JDERDALE, F	L 33334			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
SUITE 600	ORATE DRIV JDERDALE, F				
FEI Number:	30-0293167	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US			11380 PROSPERITY F	CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS, FL 33410 US	
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: FRANK RODRIGUEZ, CEO				01/25/2007	
Electronic Signature of Registered Agent			ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BECK, ROBER 800 CORPORA) Delete T A II ITE DRIVE SUITE 600 IDALE, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STARKMAN, JA 800 CORPORA) Delete NY NTE DRIVE SUITE 600 DALE, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STARKMAN, JA 800 CORPORA) Delete NY NTE DRIVE SUITE 600 DALE, FL 33334	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VCOB (BECK, ROBER) Delete T A II	Title: Name:	() Change () Addition	

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 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.

Address:

City-St-Zip:

SIGNATURE: JAY STARKMAN Ρ 01/25/2007

800 CORPORATE DRIVE SUITE 600

FORT LAUDERDALE, FL 33334

Address:

City-St-Zip: