2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000125387

Address:

City-St-Zip:

FILED Nov 08, 2005 Secretary of State

Entity Nai	me: ALPHA ASO, INC.		
Current P	rincipal Place of Business:	New Princ	ipal Place of Business:
	T MOORE RD SUITE 115 TON, FL 33487		
Current M	ailing Address:	New Maili	ng Address:
	T MOORE RD SUITE 115 TON, FL 33487		
FEI Number:	FEI Number Applied For (X)	FEI Number Not Appl	licable () Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
1200 SOU	ORATION SYSTEM TH PINE ISLAND ROAD ON, FL 33324 US		
	named entity submits this statement for the of Florida.	purpose of changing it	ts registered office or registered agent, or both,
SIGNATU	RE:		
	Electronic Signature of Registered A	gent	Date
OFFICERS	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	D () Delete BECK II, ROBERT 1801 CLINT MOORE RD SUITE 115 BOCA RATON, FL 33487	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	CEO () Delete STARKMAN, JAY 1801 CLINT MOORE RD SUITE 115 BOCA RATON, FL 33487	Title: Name: Address: City-St-Zip:	CEOP (X) Change () Addition STARKMAN, JAY 1801 CLINT MOORE RD SUITE 115 BOCA RATON, FL 33487
Title: Name: Address: City-St-Zip:	CFO () Delete NORITAKE, RICHARD 1801 CLINT MOORE RD SUITE 115 BOCA RATON, FL 33487	Title: Name: Address: City-St-Zip:	TSD (X) Change () Addition STARKMAN, JAY 1801 CLINT MOORE RD SUITE 115 BOCA RATON, FL 33487
Title: Name:	() Delete	Title: Name:	VCOB () Change (X) Addition BECK, ROBERT A II

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.

Address: City-St-Zip:

SIGNATURE: JAY STARKMAN CEOP 11/08/2005

1801 CLINT MOORE RD #115

BOCA RATON, FL 33487