

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000087193

FILED  
Apr 06, 2012  
Secretary of State

Entity Name: ALPHA LOGISTICS SERVICE, INC.

## Current Principal Place of Business:

230 SUNPORT LANE  
100  
ORLANDO, FL 32809

## New Principal Place of Business:

230 SUNPORT LANE  
100  
ORLANDO, FL 32809 UN

## Current Mailing Address:

230 SUNPORT LANE  
100  
ORLANDO, FL 32809

## New Mailing Address:

FEI Number: 20-5126040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BETHENCOURT, MARIA E  
230 SUNPORT LANE  
100  
ORLANDO, FL 32809 US

## Name and Address of New 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

## OFFICERS AND DIRECTORS:

Title: P, S  
Name: BETHENCOURT, MARIA E  
Address: 230 SUNPORT LANE, #100  
City-St-Zip: ORLANDO, FL 32809

Title: T, D  
Name: BETHENCOURT, MARIA E  
Address: 230 SUNPORT LANE, #100  
City-St-Zip: ORLANDO, FL 32809

Title: VP D  
Name: BETHENCOURT, ROBERT J  
Address: 230 SUNPORT LANE, #100  
City-St-Zip: ORLANDO, FL 32809

Title: VP D  
Name: BETHENCOURT, CAROLINE F  
Address: 230 SUNPORT LANE, #100  
City-St-Zip: ORLANDO, FL 32809

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: ROBERT J BETHENCOURT

VP

04/06/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date