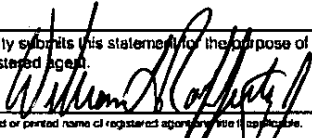
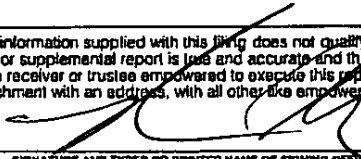


FILED  
Apr 28, 2008 8:00 am  
Secretary of State

04-28-2008 90392 049 \*\*\*150.00

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                        |                                                                                                                                                                                                                                                   |                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P07000027575</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                        |                                                                                                                                                                  |                                                                                                                                                                        |
| 1. Entity Name<br>ALTERNA HOLDINGS CORP.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                        |                                                                                                                                                                                                                                                   |                                                                                                                                                                        |
| Principal Place of Business<br>6600 N. ANDREWS AVENUE, SUITE 130<br>FT. LAUDERDALE, FL 33309                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                        | Mailing Address<br>6600 N. ANDREWS AVENUE, SUITE 130<br>FT. LAUDERDALE, FL 33309                                                                                                                                                                  |                                                                                                                                                                        |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                        | 3. Mailing Address                                                                                                                                                                                                                                |                                                                                                                                                                        |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                        | Suite, Apt. #, etc.                                                                                                                                                                                                                               |                                                                                                                                                                        |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                        | City & State                                                                                                                                                                                                                                      |                                                                                                                                                                        |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Country                                                                                                                | Zip                                                                                                                                                                                                                                               | Country                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                        | 04222008 Chg-P CR2E034 (12/06)                                                                                                                                                                                                                    |                                                                                                                                                                        |
| 4. FEI Number 20-8589002                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                        | Applied For<br>Not Applicable                                                                                                                                                                                                                     |                                                                                                                                                                        |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                        | \$8.75 Additional Fee Required                                                                                                                                                                                                                    |                                                                                                                                                                        |
| 6. Name and Address of Current Registered Agent<br>RAFFERTY, STOLZENBERG, GELLES, TENENHOLTZ,<br>1401 BRICKELL AVENUE, SUITE 825<br>MIAMI, FL 33131                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                        | 7. Name and Address of New Registered Agent<br>Name William L. Rafferty, Jr., Esq.<br>Street Address (P.O. Box Number is Not Acceptable)<br>Rafferty, Stolzenberg Gelles et al<br>1401 Brickell Avenue, Suite 825<br>City Miami FL Zip Code 33131 |                                                                                                                                                                        |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE  William L. Rafferty, Jr., Esq. 4/25/08<br>Signature, typed or printed name of registered agent, not to be applicable. (NOTE: Registered Agent signature required when reinstating) DATE                                                                                                                        |                                                                                                                        |                                                                                                                                                                                                                                                   |                                                                                                                                                                        |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2008 Fee will be \$550.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                        | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                   |                                                                                                                                                                        |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                        | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                                                             |                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | D<br>KONRAD, ROBERT L <input type="checkbox"/> Delete<br>6600 N. ANDREWS AVENUE, SUITE 130<br>FT. LAUDERDALE, FL 33309 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                    | T/S<br>KONRAD, ROBERT L. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>6600 N. Andrews Avenue, Suite 130<br>Ft. Lauderdale, FL 33309 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Delete                                                                                        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                                      |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                                        |                                                                                                                                                                                                                                                   |                                                                                                                                                                        |
| SIGNATURE:  Robert L. Konrad                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                        | 4/22/08 (954) 703-2020<br>Date Daytime Phone #                                                                                                                                                                                                    |                                                                                                                                                                        |