

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 538607

Entity Name: ALPHA TRAVEL, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

10063 S.W. 72ND STREET
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

10063 S.W. 72ND STREET
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 59-1749912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JORGE BLANCO
1401 PONCE DE LEON
STE 202
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PRENAT, DANIEL,
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 00000,

Title: PD () Delete
Name: GONZALEZ, LAURA,
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 00000,

Title: STD () Delete
Name: L PRENAT, ARACELLI
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL,

Title: D () Delete
Name: GONZALEZ, VICTOR,
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PRENAT, DANIEL,
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 33173

Title: PD (X) Change () Addition
Name: GONZALEZ, LAURA,
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 33173

Title: STD (X) Change () Addition
Name: L PRENAT, ARACELLI
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 33173

Title: D (X) Change () Addition
Name: GONZALEZ, VICTOR,
Address: 10063 S.W. 72ND STREET
City-St-Zip: MIAMI, FL 33173

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: LAURA S. GONZALEZ

Electronic Signature of Signing Officer or Director

MRS.

04/28/2008

_____ Date