

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 538607

Entity Name: ALPHA TRAVEL, INC.

FILED
Feb 26, 2009
Secretary of State

Current Principal Place of Business:

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

Current Mailing Address:

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

New Principal Place of Business:

9835 SW 72ND STREET
STE 103
MIAMI, FL 33173 US

New Mailing Address:

9835 SW 72ND STREET
STE 103
MIAMI, FL 33173 US

FEI Number: 59-1749912

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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 33173

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PRENAT, DANIEL,
Address: 9835 SW 72ND STREET SUITE 103
City-St-Zip: MIAMI, FL 33173

Title: PD (X) Change () Addition
Name: GONZALEZ, LAURA,
Address: 9835 SW 72ND STREET SUITE 103
City-St-Zip: MIAMI, FL 33173

Title: STD (X) Change () Addition
Name: L PRENAT, ARACELLI
Address: 9835 SW 72ND STREET SUITE 103
City-St-Zip: MIAMI, FL 33173

Title: D (X) Change () Addition
Name: GONZALEZ, VICTOR,
Address: 9835 SW 72ND STREET SUITE 103
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

PD

02/26/2009

Electronic Signature of Signing Officer or Director

Date