

# **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F12664

Entity Name: ALPHA INDUSTRIAL SUPPLIES, INC.

**FILED**  
**Apr 26, 2005**  
**Secretary of State**

## **Current Principal Place of Business:**

1810 NORTH 25TH STREET  
TAMPA, FL 33605

## **New Principal Place of Business:**

## **Current Mailing Address:**

PO BOX 75465  
TAMPA, FL 33675 US

## **New Mailing Address:**

FEI Number: 59-2049976

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

BLACK, PETER ALLEN  
1810 N. 25TH ST.  
TAMPA, FL 33605 US

## **Name and Address of New Registered Agent:**

BLACK, PETER A  
1810 N. 25TH ST.  
TAMPA, FL 33605 US

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: PETE BLACK

04/26/2005

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: BLACK, PETER ALLEN R,  
Address: 12605 STILLWATER TERR.  
City-St-Zip: TAMPA, FL 33602

Title: VSD ( ) Delete  
Name: BLACK, SARALEE,  
Address: 12605 STILLWATER TERR.  
City-St-Zip: TAMPA, FL 33602

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: BLACK, PETER A  
Address: 12605 STILLWATER TERR.  
City-St-Zip: TAMPA, FL 33602

Title: VSD (X) Change ( ) Addition  
Name: BLACK, SARALEE  
Address: 12605 STILLWATER TERR.  
City-St-Zip: TAMPA, FL 33602

Title: VPS ( ) Change (X) Addition  
Name: BLACK, MICHAEL J  
Address: 3117 W KNIGHTS AVE  
City-St-Zip: TAMPA, FL 33611

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.

SIGNATURE: PETE BLACK

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date