## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # H91657

(7)

FILED
Jun 11 1996 8:00 am
Secretary of State

ALPHA ADJUSTMENT SERVICES, INC.	

Principal Place of Business Mailing Address  2855 UNIVERSITY DR. 2855 UNIVERSITY DR.				I DOBNO II DARA ADDAL HOLO DHIBA RI			)  <b>     </b>	
STE. #320	-	STE. #320						
CORAL SPRINGS FL 33065 US		US US	CORAL SPRINGS FL 33065 US		3. Date Incorporated or Qualified 12/26/1985	10 Noorporated or Qualified 3a. Date of Last Report 06/14/1995		
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26			59-2623943			Not Applicable
Suite, Apt #	ŧ, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution			O May Be
23 Zun	Country	<b>28</b>	Cour	ntrv	8. This corporation has liability for	intangible ta		
24			30		Florida Statutes 🔀 Yes 🔲 No			
14	g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81 Name				
				ess (P.O. Box Number is Not Acceptable)				
2855 U Suite	iniversity drive 320		-	83				
	. SPRINGS FL 33061			84 City			85 Z	ip Code
				'	ration submits this statement for the pu	FL	.   -	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF			
THILE	710	[] DELETE	1.17	TLF		[	Change	Addition
NAME	SANTIAGO, JORGE W.		1.2 NA	1				
STREET ADDRESS	2855 UNIV DRIVE CORAL SPGS. FL			REET ADDRESS				
CITY-ST-ZIP	VSD VSD	DELETE	1.4 CI 2 1 TI	TY F			Change	Addition
TIFLE NAME	SANTIAGO, IRAIDA		2 2 N				_	_
STREET ADDRESS	2855 UNIV. DRIVE			REET ADDRESS				
CITY - ST - ZIP	CORAL SPGS. FL		2.4.C	1Y-S1-ZP				
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NAME			3.2 N	ł				
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NAME			52 N	AM€				
STREET ADDRESS				TREET AECORESS				
CITY - ST - ZIP		FREEER		ITY-ST-7IP			Change	- Addition
TITLE		C DELETE	6 1 1	1				L Addition
NAME			62N	THEET ALIDRESS				
STREET ADDRESS				ITY - S1 - ZIP				
CITY - S1 - ZIP						0.07/2.43 E	orida Stat	utas I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes: I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

STORER W. 5A NT (46 ()

6-1-96

954.345.511