FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K59592

(1)

ALPHA GENERAL CONTRACTORS, INC.

()

FILED
Jan 26 1998 8:00am
Secretary of State



| Principal Place | e of Business | Mailing Address | | | | |
|--|--|--|-----------------------------------|---|-----------------------------------|--|
| P.O. BOX 1868 FT. WALTON BEACH FL 32549 | | P.O. BOX 1968 FT. WALTON BEACH FL 32549 | | | | |
| | | | | DO NOT WRITE IN THIS SPACE | | |
| | | | | 3. Date Incorporated or Qualified | 3 31 AOL | |
| | | | | 01/19/1989 | | |
| A 60-00-16 | (D | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| | lace of Business | -1 | | 59-2925193 | Not Applicable | |
| 21 | | 26 | | 08-2320 130 | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| 22 City & State | , | City & State | | 6 Flanting Composing Financing | | |
| ' | 9 | - | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip | Country | Zip | Country | This corporation owes or has paid the control of the corporation of the corporation ower or has paid the corporation of the corporat | | |
| 24 | — <u> </u> | 29 | 30 | Personal Property Tax due June 30. | Yes No | |
| 24 | 25 25 S. Name and Address of Curre | | 130 | 10. Name and Address of New Registers | | |
| 14/14 | NTE, DAVID RANDELL | | 81 Name | | | |
| | | | | | | |
| 141 NW HOLLYWOOD BLVD. FT. WALTON BCH. FL 32548 | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| FI. | WALTUN BUR. PL 32346 | | 83 | | | |
| | | | ** | | | |
| | | | 84 City | F | 85 Zip Code | |
| | | | | | | |
| office or r | enistered egent, or both, in the Stat | e of Florida, Such change was | authorized by the corpo | orporation submits this statement for the purpose pration's board of directors. I hereby accept the a | pointment as registered | |
| agent. I a | m familiar with, and accept the obli | gations of, Section 607.0505, Fi | orida Statutes. | | | |
| SIGNATURE | | | | | | |
| | Signature, typed or printed name of registered a | | TE: Registered Agent signature re | | | |
| 12. | | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS A | Change Addition | |
| TITLE | PST DAME DANGE | DELETE | 11 THILE | | □ cuarge □ vocution | |
| NAME | WHITE, DAVID RANDELL | | 1.2 NAME | | | |
| STREET ADDRESS | 308 FLORENCE STREET | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | DEFUNIAK SPRINGS FL | | 1.4 CITY-ST-ZIP | | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition | |
| NAME | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 2 4 CITY-ST-ZIP | | <u></u> | |
| TITLE | | DELETE | 3.1 TITLE | | Change Addition | |
| NAME | | | 3.2 NAME | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | |
| CITY - ST - ZIP | | | 3.4. CITY - ST - ZIP | | | |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition | |
| NAME | | | 4. 2 NAME | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY - ST - ZIP | | | |
| TITLE | | DELETE | 5.1 TITLE | | Change Addition | |
| NAME | | <u> </u> | 5.2 NAME | | | |
| | | | 5.3 STREET ADDRESS | | | |
| STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | DELETE | 6.4 CITY - ST - ZIP 6.1 TITLE | | ☐ Change ☐ Addition | |
| TITLE | | C OULT | | | | |
| NAME | | | 6.2 NAME | | | |
| STREET ADDRESS | l | | 6.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 6.4 City-St-ZiP | Lin Contine 110 07(9)(i) Elected Statutos Lindham | contitue that the information | |
| 14. Thereby of | certify that the information supplied. | with this tiling does not qualify: | for the exemption stated | in Section 119.07(3)(i), Florida Statutes. I further | certify that the information | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in the same statement with the address.

David R. White

01/12/98

850-664-5100