FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (3) 1.24619

## **FILED** Jan 20 1998 8:00am Secretary of State

ALPHA	ITECH SYSTEMS, INC.								
Principal Place of Business Mailing Address							HOI II DIO 1811 DIBII	I BIBII DIDII BIBII BII	AT OFFIS 100
2530 KIRBY AVE. N.E. 2530 KIRBY AV PALM BAY FL 32905 PALM BAY FL 32905						DO NO	T WRITE IN TH	HIS SPACE	
						3. Date Incorporated or Q		110 01 7101	
						10/23/1989			
2. Principal F	Place of Business	2a, Mailing A	ddress			4. FEI Number		I Ar	pplied For
21		26	25			59-2978645		XNO	ot Applicable
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status De	sired 🖼	\$8.75	Additional equired
City & Stat	e	City & St	City & State			6. Election Campaign Fina	incing	\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
	Zip Country		Zip		1		8. This corporation owes or has paid the current year Intangible		
24 25			29 30				Personal Property Tax due June 30.  Yes  No  10. Name and Address of New Registered Agent		
	9. Name and Address of Curr	rent Hegistered Age	ını	81	Name	10. Name and Address of	Man Hadister	rea Agent	
	HLUPS, JERRY P.	4.07		82					
	169 PINEAPPLE AVE. NORTHE	ASI			Street A	Address (P.O. Box Number is Not A	(cceptable)		
1	ALM BAY FL 32905			83	83				
ļ				84			<u></u>		
					City		FL 85 Zip Code		
office or i agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob-	ate of Florida. Such o ligations of, Section ( agent and tile if applicable.	thange was at 607.05 <b>0</b> 5, Flor	uthorized by rida Statute	y the corp s.	oration's board of directors. I here required when reinstating)  ADDITIONS/CHANGES	by accept the	appointment as	registered
12.				1.1 TITLE		Applitotojotivitaco	O OITTOLING!	☐ Change	Addition
NAME	PHILLIPS, JERRY P			1.2 NAME					-
STREET ADDRESS	1069 PINEAPPLE AVE. NE		1.3 \$		ADDRESS				
CITY-ST-ZiP	PALM BAY FL 32905		1.4 CITY - ST - 2						
TITLE			DELETE	2.1 TITLE				Change	Addition
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET	ADDRESS				
CITY-ST-ZIP				2. 4 CITY-	S1-ZIP				
TITLE		L	] DELETE	3.1 TITLE				L Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	ADDRESS				
CITY-ST-ZIP			1 DELETE	3.4 CITY-	ST-ZIP			Change	Addition
TITLE		L	] DELETE	4.1 TITLE				∐ Change	L.J Addition
NAME OTOTET ADDOCSO				4. 2 NAME	- 1				
STREET ADDRESS				4.3 STREET	1				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - S 5.1 TITLE	11-7IF			☐ Change	Addition
NAME		_		5.2 NAME					
STREET ADDRESS				5.3 STREET	ADORESS				
CITY-ST-ZIP				5.4 CITY - S					
TITLE			DELETÉ	6.1 TITLE				Change	Addition
NAME				6.2 NAME	Ī				
····			6.3 STREET	ADDRESS					
				1					

14. 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 information 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 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.

01/8/98

(4A) 729-04A