## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000069436

Title:

Name:

Address:

City-St-Zip:

FILED Apr 30, 2009 Secretary of State

Entity Name: ALPHA FINANCIAL GROUP, INC.						
Current Pr	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
3810 NORTH EDGEWATER DRIVE ORLANDO, FL 328304				1808 WESTPOINTE CIR ORLANDO, FL 32835		
Current Mailing Address:			New Mailir	New Mailing Address:		
P O BOX 617613 ORLANDO, FL 328617613						
FEI Number:	33-1011207	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certific	cate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
ROCK, CEDRIC A 1808 WESTPOINTE CIRCLE ORLANDO, FL 32835 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:						
Electronic Signature of Registered Agent Date  Election Campaign Financing Trust Fund Contribution ( ).					Date	
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E ROCK, CEDRIC / 1808 WESTPOIN ORLANDO, FL 3	ITE CIRCLE	Title: Name: Address: City-St-Zip:	()Change	( ) Addition	
Title: Name: Address: City-St-Zip:	SV ()E ROCK, VICTORIA 1808 WESTPOIN ORLANDO, FL 3	ITE CIRCLE	Title: Name: Address: City-St-Zip:	SVP (X) Change ROCK, VICTORIA L 1808 WESTPOINTE CIP ORLANDO, FL 32835	( ) Addition	
Title: Name: Address: City-St-Zip:	V ()E ROCK, MIA S 1808 WESTPOIN ORLANDO, FL 3		Title: Name: Address: City-St-Zip:	SVP (X) Change ROCK, MIA S 1808 WESTPOINTE CIF ORLANDO, FL 32835	( ) Addition	

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.

Title:

Name:

Address:

City-St-Zip:

VΡ

ROCK, YANIS M

ORLANDO, FL 32835

1808 WESTPOINTE CIRCLE

(X) Change ( ) Addition

SIGNATURE: CEDRIC AROCK P 04/30/2009

( ) Delete

1808 WESTPOINTE CIRCLE

ROCK, YANIS M

ORLANDO, FL 32835