

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119710

FILED
Apr 13, 2005
Secretary of State

Entity Name: ALTERNATE OPPORTUNITIES, INC.

Current Principal Place of Business:

100 NORTH BISCAYNE BOULEVARD
#2100 NEW WORLD TOWER
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

100 NORTH BISCAYNE BOULEVARD
#2100 NEW WORLD TOWER
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 20-0428891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUR, THOMAS
100 NORTH BISCAYNE BOULEVARD
#2100 NEW WOLRD TOWER
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

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 ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: BAUR, THOMAS
Address: 100 NORTH BISCAYNE BOULEVARD, #2100
City-St-Zip: MIAMI, FL 33132 US

Title: VP/D () Delete
Name: HERMAN, RICHARD
Address: 20 WATERSIDE PLAZA SUITE 36K
City-St-Zip: NEW YORK, NY 10010

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: RAKOW, ROBERT
Address: 2600 LANTERN LANE
City-St-Zip: NAPLES, FL 34102

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: THOMAS BAUR

P/D

04/13/2005

Electronic Signature of Signing Officer or Director

Date