

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000139106

**Entity Name:** ALPHA DRUGS INC

**FILED**  
**Feb 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7857 PALM RIVER ROAD  
TAMPA, FL 33619 US

**New Principal Place of Business:**

**Current Mailing Address:**

7857 PALM RIVER ROAD  
TAMPA, FL 33619 US

**New Mailing Address:**

**FEI Number:** 90-0128585

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAJUDEEN D ALIMI  
9214 SUNNYOAK  
RIVERVIEW, FL 33569 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ADEKANMBI, ADEKUNLE O  
Address: 1330 HATCHER LOOP DR  
City-St-Zip: BRANDON, FL 33551

Title: D  
Name: ALIMI, TAJUDEEN DADA  
Address: 9214 SUNNYOAK DR  
City-St-Zip: RIVERVIEW, FL 33569

I hereby 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 all other like empowered.

SIGNATURE: TAJUDEEN D ALIMI

D

02/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date