

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000060765

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** ALPHA LINK SERVICE CORP.

**Current Principal Place of Business:**

3303 W UNION ST  
TAMPA, FL 33607

**New Principal Place of Business:**

4207 S DALE MABRY HWY  
10303  
TAMPA, FL 33611

**Current Mailing Address:**

3303 W UNION ST  
TAMPA, FL 33607

**New Mailing Address:**

4207 S DALE MABRY HWY  
10303  
TAMPA, FL 33611

**FEI Number:** 20-0984854

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

OSORIO, JOSE O  
6731 CAVACADE DR  
BUILDING 50  
TAMPA, FL 33614 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: P  
Name: PATINO, FABIO  
Address: 4207 S DALE MABRY HWY UNIT 10303  
City-St-Zip: TAMPA, FL 33611

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: FABIO PATINO

P

02/18/2011

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

\_\_\_\_\_  
Date