## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000087195

Entity Name: ALPHA LOGISTICS XPRESS, INC.

**FILED** Apr 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

404 SUNPORT LANE 230 SUNPORT LANE

#100 #100

ORLANDO, FL 32809 ORLANDO, FL 32809

**Current Mailing Address: New Mailing Address:** 

230 SUNPORT LANE 404 SUNPORT LANE

#100 #100

ORLANDO, FL 32809 ORLANDO, FL 32809

FEI Number: 20-5126001 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BETHENCOURT, MARIA E BETHENCOURT, MARIA E 404 SUNPORT LÂNE, #100 230 SUNPORT LÂNE. #100 ORLANDO, FL 32809 ORLANDO, FL 32809

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: MARIA E BETHENCOURT 04/25/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete Title: (X) Change ( ) Addition BETHENCOURT, MARIA E BETHENCOURT, MARIA E Name: 404 SUNPORT LANE, #100 230 SUNPORT LANE, #100 Address: Address: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

City-St-Zip: Title: Title: (X) Change ( ) Addition () Delete

BETHENCOURT, MARIA E Name: Name: BETHENCOURT, MARIA E 404 SUNPORT LANE, #100 230 SUNPORT LANE, #100 Address: Address: ORLANDO, FL 32809 ORLANDO, FL 32809 City-St-Zip: City-St-Zip:

( ) Delete Title: (X) Change ( ) Addition Title: VP D VP D BETHENCOURT, ROBERT J BETHENCOURT, ROBERT J Name: Name: 404 SUNPORT LANE, #100 230 SUNPORT LANE, #100 Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

Title: VP D () Delete Title: VP D (X) Change ( ) Addition BETHENCOURT, CAROLINE F BETHENCOURT, CAROLINE F Name: Name: Address: 404 SUNPORT LANE, #100 Address: 230 SUNPORT LANE, #100 City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809

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.

PS SIGNATURE: MARIA E BETHENCOURT 04/25/2007