2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000005901

FILED Apr 18, 2008 Secretary of State

Entity Name: ALPHA TECHNOLOGY U.S.A. CORPORATIO	N
Current Principal Place of Business:	New Principal Place of Business:
1340 BENNETT DR LONGWOOD, FL 32750	
Current Mailing Address:	New Mailing Address:
1340 BENNETT DR LONGWOOD, FL 32750	
FEI Number: 13-4359203 FEI Number Applied For () FEI N	lumber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
AARONSON, AUSTIN N ESQ AARONSON, AUSTIN, PA 1801 LEE RD - STE 360 WINTER PARK, FL 32789 US	WILLIAMS, OLA R 1340 BENNETT DRIVE LONGWOOD, FL 32750 US
The above named entity submits this statement for the purpose in the State of Florida.	e of changing its registered office or registered agent, or both,
SIGNATURE: OLA R WILLIAMS	04/18/2008
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D () Delete Name: COLE, KEVIN Address: 1340 BENNETT DR City-St-Zip: LONGWOOD, FL 32750	Title: D (X) Change () Addition Name: DOLE, KEVIN Address: 1340 BENNETT DR City-St-Zip: LONGWOOD, FL 32750
Title: () Delete Name: Address: City-St-Zip:	Title: D () Change (X) Addition Name: CERVO, JOHN C Address: 1340 BENNETT DRIVE City-St-Zip: LONGWOOD, FL 32750
Title: () Delete Name: Address: City-St-Zip:	Title: D () Change (X) Addition Name: WILLIAMS, OLA R Address: 1340 BENNETT DRIVE City-St-Zip: LONGWOOD, FL 32750

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.

SIGNATURE: OLA R WILLIAMS D 04/18/2008