2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 29, 2009
Secretary of State

DOCUMENT# P07000057180

Entity Name: ALPHA PRINT SOLUTIONS, INC.

Current Principal Place of Business:

2529 NW 74 AVENUE
MIAMI, FL 33122 US

New Principal Place of Business:

Current Mailing Address:

2529 NW 74 AVENUE
MIAMI, FL 33122 US

New Mailing Address:

FEI Number: 01-0898417 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMIREZ, FABIO
2529 NW 74 AVE
MIAMI, FL 33122 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: FABIO RAMIREZ

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: RAMIREZ, FABIO
Address: 2529 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122 US

Title: S ( ) Delete
Name: GRAMATGES, ROBERTO
Address: 2529 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122 US

Title: T ( ) Delete
Name: MOSER, ANDRES
Address: 2529 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122 US

Title: D ( ) Delete
Name: GOMEZ, RENIER
Address: 2529 NW 74 AVENUE
City-St-Zip: MIAMI, FL 33122 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: FABIO RAMIREZ PR 09/29/2009

Electronic Signature of Signing Officer or Director Date