2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 07, 2009
Secretary of State

DOCUMENT# P08000082089

Entity Name: ALPHA ZEN INC.

Current Principal Place of Business:

4131 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

4131 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 26-3310043 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SANTOS, WILSON N
4131 SOUTHSIDE BLVD
205
JACKSONVILLE, FL 32216 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: VP ( ) Delete
Name: SANTOS, WILSON
Address: 5481 CYPRESS LINKS BLVD
City-St-Zip: ELKTON, FL 32033 FL

Title: VP ( ) Delete
Name: ANDESCAVAGE, ANA P
Address: 10075 GATE PARKWAY N # 607
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: S (X) Delete
Name: RODRIGUEZ, MIKE
Address: 5481 CYPRESS LINKS
City-St-Zip: ELKTON, FL 32033 US

Title: S (X) Delete
Name: ANDESCAVAGE, JOHN J
Address: 10075 GATE PARKWAY N # 607
City-St-Zip: JACKSONVILLE, FL 32246 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: SANTOS, WILSON
Address: 5481 CYPRESS LINKS BLVD
City-St-Zip: ELKTON, FL 32033 FL

Title: VP (X) Change ( ) Addition
Name: RODRIGUEZ, MIKE
Address: 5481 CYPRESS LINKS BLVD
City-St-Zip: ELKTON, FL 32033 US

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: WILSON N SANTOS PRES 07/07/2009

Electronic Signature of Signing Officer or Director — Date