

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000111520

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** ALPHA LOSS CONTROL SERVICES, INC.

**Current Principal Place of Business:**

10152 W INDIANTOWN ROAD #128  
JUPITER, FL 33478 US

**New Principal Place of Business:**

16917 134TH TERRACE N  
JUPITER, FL 33478 US

**Current Mailing Address:**

10152 W INDIANTOWN ROAD #128  
JUPITER, FL 33478 US

**New Mailing Address:**

P.O. BOX 7966  
JUPITER, FL 33468 US

**FEI Number:** 65-0656362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BESWICK, ERICH  
10152 W INDIANTOWN ROAD #128  
JUPITER, FL 33478 US

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

BESWICK, ERICH  
16917 134TH TERRACE N  
JUPITER, FL 33478 US

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:** ERICH BESWICK

01/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BESWICK, ERICH  
**Address:** 16917 134TH TERRACE N  
**City-St-Zip:** JUPITER, FL 33478 US

**Title:** V  
**Name:** BESWICK, DOROTHY  
**Address:** 16917 134TH TERRACE N  
**City-St-Zip:** JUPITER, FL 33478 US

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:** ERICH BESWICK

PD

01/24/2012

Electronic Signature of Signing Officer or Director

Date