

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000100957

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** ALPHA EXPRESS DELIVERY CORP

**Current Principal Place of Business:**

5691 SW 162 COURT  
MIAMI, FL 33193 US

**New Principal Place of Business:**

8348 SW 161 PLACE  
MIAMI, FL 33193 US

**Current Mailing Address:**

5691 SW 162 COURT  
MIAMI, FL 33193 US

**New Mailing Address:**

8348 SW 161 PLACE  
MIAMI, FL 33193 US

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AVILES, ALAN R  
5691 SW 162 COURT  
MIAMI, FL 33193 US

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

AVILES, ALAN R  
8348 SW 161 PLACE  
MIAMI, FL 33193 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: ALAN AVILES

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTSD  
Name: AVILES, ALAN R  
Address: 8348 SW 161 PLACE  
City-St-Zip: MIAMI, FL 33193

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: ALAN AVILES

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04/30/2012

Electronic Signature of Signing Officer or Director

Date