

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
95 MAY -1 AM 5:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000067728 (4)**

1. Corporation Name

ALPHA ACQUISITIONS CORP.

Principal Place of Business

**747 W. BRANDON BLVD.
BRANDON FL 33511**

Mailing Address

**747 W. BRANDON BLVD.
BRANDON FL 33511**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1993

3a. Date of Last Report

04/20/1994

4. FEI Number

59-3204831

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

☐

Added to Fees

8. The corporation has liability for intangible tax under S. 194(1)(b) Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALLISTON, CURTIS L.
739 WEST BRANDON BLVD.
BRANDON FL 33511**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 194(1)(b) and 194(1)(b) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the new law (b)(1), Florida Statutes.

Signature

Signature of Registered Agent or Registered Agent's Attorney

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	P ALLISTON, CURTIS L. 4936 PENNABURY DR. TAMPA FL	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS		2. STREET ADDRESS	☐ Change ☐ Addition
3. CITY		3. CITY	☐ Change ☐ Addition
4. NAME		4. NAME	☐ Change ☐ Addition
5. STREET ADDRESS		5. STREET ADDRESS	☐ Change ☐ Addition
6. CITY		6. CITY	☐ Change ☐ Addition
7. NAME		7. NAME	☐ Change ☐ Addition
8. STREET ADDRESS		8. STREET ADDRESS	☐ Change ☐ Addition
9. CITY		9. CITY	☐ Change ☐ Addition
10. NAME		10. NAME	☐ Change ☐ Addition
11. STREET ADDRESS		11. STREET ADDRESS	☐ Change ☐ Addition
12. CITY		12. CITY	☐ Change ☐ Addition
13. NAME		13. NAME	☐ Change ☐ Addition
14. STREET ADDRESS		14. STREET ADDRESS	☐ Change ☐ Addition
15. CITY		15. CITY	☐ Change ☐ Addition
16. NAME		16. NAME	☐ Change ☐ Addition
17. STREET ADDRESS		17. STREET ADDRESS	☐ Change ☐ Addition
18. CITY		18. CITY	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 194(1)(b) Florida Statutes. I affirm that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 1 on Block 13. I am required to execute this report as required by Chapter 607, Florida Statutes.

SIGNATURE:

Curtis L. Alliston
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1125-95 689-4966
Date