

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000079324

FILED  
Jan 10, 2012  
Secretary of State

Entity Name: ALPHA MRC, INC.

**Current Principal Place of Business:**

2395 N COURTNAY PKWY  
102  
MERRITT ISLAND, FL 32953 US

**New Principal Place of Business:**

2395 N COURTNAY PKWY  
SUITE #102  
MERRITT ISLAND, FL 32953 US

**Current Mailing Address:**

2395 N COURTNAY PKWY  
102  
MERRITT ISLAND, FL 32953 US

**New Mailing Address:**

2395 N COURTNAY PKWY  
SUITE #102  
MERRITT ISLAND, FL 32953 US

FEI Number: 59-3225055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CONSTANTINIDE, MICHAEL F  
3207 BUCKINGHAM LANE  
COCOA, FL 32926 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: VT  
Name: CONSTANTINIDE, MICHAEL F  
Address: 3207 BUCKINGHAM LANE  
City-St-Zip: COCOA, FL 32926

Title: PDC  
Name: CONSTANTINIDE, ROXANA R  
Address: 3207 BUCKINGHAM LANE  
City-St-Zip: COCOA, FL 32926

Title: S  
Name: CONSTANTINIDE, JOHN M  
Address: 178 COVE LOOP DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32953

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: MICHAEL F CONSTANTINIDE

VT

01/10/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date