FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY -1 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000075729 (1)

1. Corporate Name
ALPHAREST, INC.

Principal Place of Business
7661 PARK BLVD.
UNIVERSITY PARK FL 34201

Mailing Address
1285 GULF BLVD., APT.#6
ENGLEWOOD FL 34223

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: 10/14/1994
3a. Date of Last Report:

2. Principal Place of Business
21
Suite Apt # or
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt # or
27
City & State
28
29 30

4. FEI Number: 59 - 3272063
Applied For
Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SPECHT, KURT U
1285 GULF BLVD., APT. #6
ENGLEWOOD FL 34223

10. Name and Address of New Registered Agent

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 607.0505 and 607.0506, 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 section 607.0505, Florida Statutes.

SIGNATURE: X

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☒ Addition
D/P/T/S
KURT U SPECHT
1285 GULF BLVD APT #6
ENGLEWOOD FL 34223

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

7/24

14. I hereby certify that the information supplied with this filing, and any corrections to information previously filed with this office, complies with the applicable provisions of Florida Statutes. I further certify that I am familiar with and accept the duties and responsibilities as registered agent. Business entities submitting documents for filing must designate a registered agent in Florida who is either a domestic corporation, a resident of Florida, or a foreign corporation authorized to transact business in Florida. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper or complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE: X
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

4.10.1995 (813)-475-3830

0338338 CP