FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P96000062687

ALIEN GROUP, INC.

Princi	pai i	Place o	t Business
20815	SW	122ND	COURT

Mailing Address

P.O. BOX 97967 MIAMI FL 33197-1414

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90056 050 ***150.00



MIAMI FL 33177	_			DO NOT WRITE IN THIS SPACE			
US		US		3. Date Incorporated or Qualifed			
				07/26/1996	}		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	<u> </u>	6		19-9703201	Not Applicable		
Suite, Apt. :		Suite, Apt. #, etc. 27 P.O. Boy #	12826	5. Certificate of Status Desired	8.75 Additional Fee Required		
City & State	<i>"</i> " " " " " " " " " " " " " " " " " "	City & State PALM	BEACH;	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year Intang			
24 <i>33417</i>	2 25 PACM BEAG	1 29 33403 30	W. PACM		Yes DNo		
	9. Name and Address of Current	Registered Agent	94 1	10. Name and Address of New Registered Ag	ent		
JATTAN, INDRA A 20815 SW 122ND COURT			81 Name 82 Street	Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33177 83 13174 87th STREET NORTH					*/		
			84 City		35 Zip Code 33412		
11. Pursuant to the provisions of Sections 507.0502 and 607.1508, 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	LEGLA RAMPE Signature, typed or printed name of registered agent		gistered Agent signature re		, 		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND I			
TITLE	P	DELETE	1.1 TITLE	JATTAN ASHOOK ANTHO	☐ Change ☐ Addition		
NAME	JATTAN, ASHOOK A		1.2 NAME	13174 87th IST NOETH	. 9		
STREET ADDRESS	20815 SW 122 CT		1,3 STREET ADDRESS	WEST PALM BEACH, 7	1 22 112		
CITY-ST-ZIP	MIAMI FL 33177	DELETE	1.4 CITY-ST-ZIP		Change Addition		
TITLE	D	LIMPLE IE	2.1 TITLE	Y . 21			
NAME	JATTAN, ANGELA		2.2 NAME	RAMPERSAL LEGUA	:14		
STREET ADDRESS	18322 SW 125TH AVE		2.3 STREET ADDRESS	13/74 877 37 TO 30	3417.		
CITY-ST-ZIP	MIAMI FL 33177	□ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	TW 1 11 - 1 1 1 2 - 1 2 - 1 1 1 1 1 1 1 1	Change Addition		
TITLE		Dette ve	3.2 NAME		,		
NAME			i				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZiP		☐ DELETE	3.4, CITY-ST-ZIP 4.1 TITLE	<u> </u>	Change Addition		
TITLE		_ occur	4. 2 NAME				
NAME			4.3 STREET ADDRESS				
STREET ADDRESS							
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	· r	Change Addition		
TITLE NAME		#4 AC-1-1	5.2 NAME	· ·			
			5.3 STREET ADDRESS		1		
STREET ADDRESS			5.4 CITY-ST-ZIP				
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		Change Addition		
NAME		_ 5222,2	6.2 NAME	T 11 10 10 10 1	-		
ſ			6.3 STREET ADDRESS	}	1		
STREET ADDRESS			6.4 CITY OT 7ID				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.