

P96000096274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

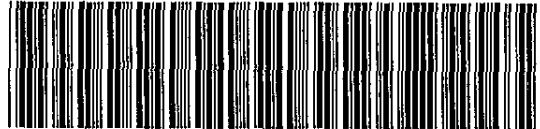
(Business Entity Name)

(Document Number)

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RD change

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STATE OF NEW YORK
CLERK OF THE COURT

05/19/05--01028--008 **35.00

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Alpha Imaging Products & Services Inc
(Name of corporation)

DOCUMENT NUMBER: P96000096274

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Gonzalez
(Name of contact person)
Alpha Imaging Products & Services Inc
DBA: Alpha LASER
(Firm/Company)

6978 Aloma Ave
(Address)

Winter Park FL 32792
(City/state and zip code)

For further information concerning this matter, please call:

Gloria Gonzalez at (407) 671-8500
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Alpha Imaging Products & Services Inc
2. The principal office address: 6978 Aloma Ave
Winter Park Fl 32792
3. The mailing address (if different): same

4. Date of incorporation/qualification: Nov 26, 1996 Document number: P96000096274

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Joseph Gonzalez
12116 Shadowbrook Lane
Orlando Fl 32828

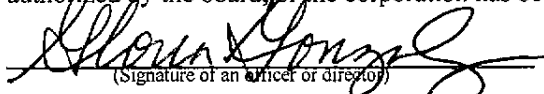
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Joseph Gonzalez
6978 Aloma Avenue
(P.O. Box NOT acceptable)
Winter Park Fl 32792

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TALLAHASSEE, FLORIDA

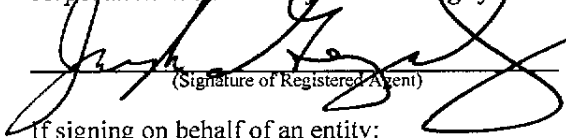
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

Gloria Gonzalez Secty
(Printed or typed name and title)

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

5-16-05
(Date)

If signing on behalf of an entity:

Joseph Gonzalez
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314