

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000099655

FILED
Jan 25, 2005
Secretary of State**Entity Name:** ALPINE CONSTRUCTION MANAGEMENT CORP.**Current Principal Place of Business:**7005 N. WATERWAY DR.
SUITE 305
MIAMI, FL 33155 US**New Principal Place of Business:****Current Mailing Address:**7005 N. WATERWAY DR.
SUITE 305
MIAMI, FL 33155 US**New Mailing Address:****FEI Number:** 65-0718054 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**DE ARMAS, J A
3211 PONCE DE LEON BLVD
STE 302
CORAL GABLES, FL 33134 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:** T (X) Delete
Name: BROWN, HUGH P
Address: 7005 N. WATERWAY DR. #305
City-St-Zip: MIAMI, FL 33175**Title:** VP () Delete
Name: TORRES, ARLENE
Address: 7005 N. WATERWAY DR. #305
City-St-Zip: MIAMI, FL 33175**Title:** S () Delete
Name: QUERO, ARLENE
Address: 7005 N WATERWAY DRIVE # 305
City-St-Zip: MIAMI, FL 33155**Title:** P () Delete
Name: QUERO, ALFRED
Address: 7005 N. WATERWAY DRIVE #305
City-St-Zip: MIAMI, FL 33175**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VP (X) Change () Addition
Name: TORRES, ARLENE
Address: 7005 N. WATERWAY DR. #305
City-St-Zip: MIAMI, FL 33155**Title:** S (X) Change () Addition
Name: QUERO, ALFRED
Address: 7005 N WATERWAY DRIVE # 305
City-St-Zip: MIAMI, FL 33155**Title:** P (X) Change () Addition
Name: QUERO, ALFRED
Address: 7005 N. WATERWAY DRIVE #305
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARLENE TORRES

VP

01/25/2005

Electronic Signature of Signing Officer or Director

Date