

# 2000 UNIFORM BUSINESS REPORT (UBR)

5/

**FILED**  
**Aug 25, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90079 025 \*\*\*150.00

**DOCUMENT # P97000008774**

1. Entity Name

ALPA INTERNATIONAL GROUP, INC.

Principal Place of Business

5437 N.W. 72ND AVE.  
 MIAMI FL 33166

Mailing Address

5437 N.W. 72ND AVE.  
 MIAMI FL 33166-4223

2. Principal Place of Business

11701 NW 102 Road

3. Mailing Address

11701 NW 102 Road

Suite, Apt. #, etc.

# 9

Suite, Apt. #, etc.

# 9

City & State

Medley, FL

City & State

Medley, FL

Zip

33178

Country

Dade

Zip

33178

Country

USA



DO NOT WRITE IN THIS SPACE

65-0832809

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired.

☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

ROTH, LEONARDO A  
 9350 SOUTH DIXIE HIGHWAY  
 PENTHOUSE TWO  
 MIAMI FL 33156

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PVST ☐ Delete  
 NAME CRAIG, PATRICIA  
 STREET ADDRESS 5437 N.W. 72ND AVENUE  
 CITY-ST-ZIP MIAMI FL 33166

TITLE D ☐ Delete  
 NAME CRAIG, PATRICIA  
 STREET ADDRESS 5437 N.W. 72ND AVENUE  
 CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
 NAME REINALDO RODRIGUEZ  
 STREET ADDRESS 1147 NW 123 PLACE  
 CITY-ST-ZIP MIAMI FL 33182

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. 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 report or supplemental 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.27.00

Date

305 885 6071

Daytime Phone #

CR2E034 (9/99)