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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000069811 (2)

ALPHA PC SERVICES, CORP.

FILED May 15 1998 8:00am Secretary of State



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ALARD, WILBER 501 NW 45 AVE MIAMI FL 33126 ### City ### Corporation submits this statement for the purpose of changing its register of directors. I hereby accept the obligations of, Section 607.05.07, Florida Statutes ### City ### C		
SO1 NW 45 AVE MIAMI FL 33128 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes SIGNATURE Signature byect or protect agent of regidenating L1 and their application. OF FICE RS AND DIRE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE DP		ess of New Registered Agent
MIAMI FL 33126 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE 1P DP DELETE 11 TITLE 12 ALARD, WILBER STREET ADDRESS 501 NW 45 AVE 1.3 STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.4 CITY-ST-Zip TITLE 1 DV Change Add NAME ALARD, UBERTAD A 22 RAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, UBERTAD A 22 RAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, UBERTAD A 22 RAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, UBERTAD A 22 RAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, UBERTAD A 22 RAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, UBERTAD A 22 RAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, CHANGE AVE 2.3 STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 1.7 Change Add NAME ALARD, CHANGE ALARD	ALARD, WILBER 81 Name	
MIAMI FL 33126 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent Lam familiar with, and accept the obligations of, Section 607.05.05, Florida Statutes SIGNATURE Signature bytect or justed name of registered agent Lama their applicable. (NOTE Registered Agent signature required when relinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NTITE DP DELETE 11 ITIE DP ALARD, WILBER 501 NW 45 AVE L3 STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 14 CITY-ST-Zip TITLE DV DELETE 2 NAME STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 DELETE 2 STREET ADDRESS CITY-ST-Zip MIAMI FL 33126 DELETE DELETE 1 TITLE Change Add Change Change Add	501 NW 45 AVE B2 Street Address (P.O. Box Number is	s Not Acceptable)
11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of florida in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE DP	MIAMI FL 33126	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 SIGN	83	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 SIGN	84 City	85 Zip Code
SIGNATURE		FL
Signature Type of product Improved registered agent Large United Signature (NOTE Registered Agent signature required when reinstating) DATE	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes	I hereby accept the appointment as registered
12.	SIGNATURE Slowaric Novel or profind name of teachered and Land little clandicable (NOTE Registered Agent signature required when reinstating)	DATE
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14. Thereby 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 suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation of 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 of on applicational with an address.

CIGNIATUDE.

4-28-98

(305) 265-4441