


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

0574349

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90083 013 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000023961

1. Corporation Name

ALPHA COMPUTER & CONSULTANTS, INC.

Principal Place of Business

3855 S.2. 137TH AVENUE
SUITE 12
MIAMI FL 33175

Mailing Address

3855 S.2. 137TH AVENUE
SUITE 12
MIAMI FL 33175

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/13/1998

4. FEI Number

65-0818857

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing

□

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

□ Yes

X No

2. Principal Place of Business

21 943 SW 87TH Avenue

Suite/Apt. #, etc.

22 A

City & State

23 MIAMI, FLORIDA

Zip

24 33174

Country

25 U.S.A.

2a. Mailing Address

26 943 SW 87TH Avenue

Suite/Apt. #, etc.

27 A

City & State

28 MIAMI FLORIDA

Zip

29 33174

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

MENDIETA, LUIS A
13200 S.W. 66TH ST
MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name

LUIS A. MENDIETA

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

917 SW 135 CT.

83

84 City

MIAMI

FL

85 Zip Code

33184

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 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 Luis A. Mendieta, President

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04/8/99

12. OFFICERS AND DIRECTORS

TITLE	PVST	□ DELETE
NAME	MENDIETA, LUIS A	
STREET ADDRESS	13200 S.W. 66TH ST	
CITY-ST-ZIP	MIAMI FL 33183	

TITLE	D	□ DELETE
NAME	MENDIETA, LUIS A	
STREET ADDRESS	13200 S.W. 66TH ST	
CITY-ST-ZIP	MIAMI FL 33183	

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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PVST	X Change □ Addition
1.2 NAME	MENDIETA, LUIS A.	
1.3 STREET ADDRESS	917 SW 135 CT.	
1.4 CITY-ST-ZIP	MIAMI, FL. 33184	

2.1 TITLE	D	X Change □ Addition
2.2 NAME	MENDIETA, LUIS A.	
2.3 STREET ADDRESS	917 SW 135 CT.	
2.4 CITY-ST-ZIP	MIAMI, FL. 33184	

3.1 TITLE		□ Change □ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		

4.1 TITLE		□ Change □ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		□ Change □ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		□ Change □ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 all other like empowered.

SIGNATURE:

Luis A. Mendieta
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/8/99

(305) 262-5517

Date

Daytime Phone #

CR2:034 (11/98)