

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 05, 2003 8:00 am
Secretary of State

02-05-2003 90112 028 ***150.00

DOCUMENT # P99000049339

1. Entity Name
ALPHA SOFTWARE SERVICES, INC.



Principal Place of Business
**7772 HARLIE ST
ORLANDO FL 32819
US**

Mailing Address
**7772 HARLIE ST
ORLANDO FL 32819
US**

30017343



2. Principal Place of Business
8124 TIBET-BUTLER DR.
Suite, Apt. #, etc.

3. Mailing Address
PO Box 1475
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
WINDERMERE FL
Zip
34786
Country
ORANGE

City & State
WINDERMERE FL
Zip
34786
Country
ORANGE

4. FEI Number
59-3581016

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**FITZGERALD, DIANE
ALPHA SOFTWARE SERVICES INC
7772 HARLIE ST
ORLANDO FL 32819**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
8124 TIBET-BUTLER DRIVE
City **WINDERMERE** **FL** Zip Code **34786**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPT
FITZGERALD, DIANE M
7772 HARLIE STREET
ORLANDO FL 32819** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
FITZGERALD, WALTER A
7772 HARLIE STREET
ORLANDO FL 32819** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**8124 TIBET-BUTLER DRIVE
WINDERMERE, FL 34786** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**8124 TIBET-BUTLER DRIVE
WINDERMERE, FL 34786** ☒ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **DIANE FITZGERALD** **1/30/03** **407-909-1577**
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E034 (10/02)