

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000082141

FILED  
Feb 14, 2012  
Secretary of State

**Entity Name:** ALPEN STAR ENTERPRISES, INC.

**Current Principal Place of Business:**

6505 BLUE LAGOON DRIVE  
SUITE 130  
MIAMI, FL 331266041 US

**New Principal Place of Business:**

**Current Mailing Address:**

6505 BLUE LAGOON DRIVE  
SUITE 130  
MIAMI, FL 331266041 US

**New Mailing Address:**

**FEI Number:** 65-0952672      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARQUEZ & MARCELO ROBAINA, P.A.  
6505 BLUE LAGOON DRIVE  
SUITE 130  
MIAMI, FL 331266041 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: DPT  
Name: TORRES, PEDRO  
Address: 6505 BLUE LAGOON DR. SUITE 130  
City-St-Zip: MIAMI, FL 331266041

Title: S  
Name: TORRES, ADRIANA P  
Address: 6505 BLUE LAGOON DR. SUITE 130  
City-St-Zip: MIAMI, FL 331266041 US

I hereby 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 all other like empowered.

SIGNATURE: PEDRO TORRES

DPT

02/14/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date