## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000011711

Entity Name: ALPHA RISK SERVICES, INC.

**Current Principal Place of Business:** 

641 MAPLE OAK CIRCLE

121

ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:** 

641 MAPLE OAK CIRCLE

121

ALTAMONTE SPRINGS, FL 32701

FEI Number: 58-2324449 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CIPPARONE & CIPPARONE, P.A. 1525 INTERNATIONAL PARKWAY 1071

LAKE MARY, FL 32746 US

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

FILED Feb 12, 2019

**Secretary of State** 

8670082404CC

Officer/Director Detail:

Title PST Title VI

Name FRANCO, MARK A SR Name FRANCO, ALESSANDRA

Address 641 MAPLE OAK CIRCLE, SUITE 121 Address 641 MAPLE OAK CIRCLE, SUITE 121
City-State-Zip: ALTAMONTE SPRINGS FL 32701 City-State-Zip: ALTAMONTE SPRINGS FL 32701

Title VP

Name FRANCO, MARK A JR
Address 720 MURPHEY STREET
City-State-Zip: SCOTTSDALE GA 30079

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.

Ρ

Electronic Signature of Signing Officer/Director Detail