### **2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000180019

Entity Name: ALPHA BUSINESS SERVICES LLC

ly Name. ALFITA BUSINESS SERVICES LI

# **Current Principal Place of Business:**

3902 HENDERSON BLVD SUITE 208 TAMPA, FL 33629

## **Current Mailing Address:**

PO BOX 291084

TAMPA, FL 33687-1084 US

FEI Number: 47-5402407 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH STREET NORTH SUITE 300 ST.PETERSBURG, FL 33702 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 04, 2021

**Secretary of State** 

9808785514CC

# Authorized Person(s) Detail:

Title MGR

Name WONG, TONY

Address 3902 HENDERSON BLVD

208

City-State-Zip: TAMPA FL 33629

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TONY WONG MANAGER 02/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date