

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000327027

**Entity Name:** ALPHA CAPITAL ESTATES LLC

**Current Principal Place of Business:**

2034 GREGORY DR.  
TAMPA, FL 33613

**Current Mailing Address:**

5470 E. BUSCH BLVD  
STE 429  
TEMPLE TERRACE, FL 33617 US

**FEI Number:** 85-3616145

**Certificate of Status Desired:** No

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

SANDERS, INDIA  
2034 GREGORY DR.  
TAMPA, FL 33613 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

**Authorized Person(s) Detail :**

Title            AUTHORIZED MEMBER  
Name            SANDERS, INDIA  
Address        5470 E. BUSCH BLVD  
                  STE 429  
City-State-Zip:    TEMPLE TERRACE FL 33617

*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:** INDIA SANDERS

AMBASSADOR

03/27/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date