

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25948

Entity Name: 2743 ALPHA, INC.

FILED
Jun 16, 2009
Secretary of State

Current Principal Place of Business:

3511 SILVERSIDE ROAD
SUITE 105
WILMINGTON, DE 19810 US

New Principal Place of Business:

Current Mailing Address:

3511 SILVERSIDE ROAD
SUITE 105
WILMINGTON, DE 19810 US

New Mailing Address:

FEI Number: 59-2956936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARIE, JOHN
320 WEST HIGH STREET
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

ARIE, JOHN
7558 POINTE VENEZIA DRIVE
ORLANDO, FL 32836 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: _____ 06/16/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARIE, JOHN B MR
Address: 320 WEST HIGH STREET
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARIE, JOHN B MR
Address: 7558 POINTE VENEZIA DRIVE
City-St-Zip: ORLANDO, FL 32836

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN ARIE P 06/16/2009
Electronic Signature of Signing Officer or Director Date