2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006410

Entity Name: ALPHA OMEGA ELITE TRACK TEAM, "INC."

FILED May 02, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13860 SW 90TH AVENUE 8542 SW 214TH WAY KK 102 MIAMI, FL 33189 US

MIAMI, FL 33176 US

Current Mailing Address: New Mailing Address:

13860 SW 90TH AVENUE 8542 SW 214TH WAY KK 102 MIAMI, FL 33176 US MIAMI, FL 33176 US

FEI Number: 20-0119490 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

FOSTER, ARTHUR L
13860 SW 90TH AVE.
KK-102
MIAMI, FL 33176 US
FOSTER, ARTHUR L
8542 SW 214TH WAY
MIAMI, FL 33189 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: ARTHUR L FOSTER 05/02/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P/D () Delete Title: P/D (X) Change () Addition

 Name:
 FOSTER, ARTHUR L SR
 Name:
 FOSTER, ARTHUR L SR

 Address:
 13860 S.W. 90TH AVENUE, KK 102
 Address:
 8542 SW 214TH WAY

 City-St-Zip:
 MIAMI, FL 33176 US
 City-St-Zip:
 MIAMI, FL 33189 US

Title: VP/D () Delete Title: VP/D (X) Change () Addition

 Name:
 KING, TARA O
 Name:
 KING, TARA O

 Address:
 13860 S.W. 90TH AVENUE. KK 102
 Address:
 8542 SW 214TH WAY

Address: 13860 S.W. 90 I H AVENUE, RK 102 Address: 8542 SW 214 I H WAY

City-St-Zip: MIAMI, FL 33176 US City-St-Zip: MIAMI, FL 33189 US

Title: TR/D () Delete Title: () Change () Addition

 Name:
 JOHNSON, DONNA-MARIA L
 Name:

 Address:
 7504 SW 179TH TER.
 Address:

 City-St-Zip:
 MIAMI, FL 33157 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARTHUR L FOSTER P/D 05/02/2005