

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000005715

FILED
Jan 27, 2009
Secretary of State

Entity Name: WORK AMERICA, INCORPORATED

Current Principal Place of Business:

3050 BISCAYNE BLVD
SUITE 502
MIAMI, FL 33137 US

New Principal Place of Business:

1125 N E 125TH STREET
SUITE 103
NORTH MIAMI, FL 33161 US

Current Mailing Address:

3050 BISCAYNE BLVD
SUITE 502
MIAMI, FL 33137 US

New Mailing Address:

1125 N E 125TH STREET
SUITE 103
NORTH MIAMI, FL 33161 US

FEI Number: 65-0730047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

COLEMAN, HERBERT J
3050 BISCAYNE BLVD
SUITE 502
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

COLEMAN, HERBERT J
1125 N E 125TH STREET
SUITE 103
MIAMI, FL 33161 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: HERBERT J COLEMAN

01/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: STRAHAM, DENISE
Address: 12333 SOUTHRIDGE DR
City-St-Zip: LITTLE ROCK, AR 72212

Title: PD () Delete
Name: COLEMAN, HERBERT J
Address: 6365 COLLINS AVE. #2006
City-St-Zip: MIAMI BEACH, FL 33141

Title: TSD () Delete
Name: JACKSON, SYLVESTER
Address: 4851 NW 21ST ST
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: NORWOOD, EDWIN
Address: 714 BROOKRIDGE DR.
City-St-Zip: TALLAHASSEE, FL 32305

Title: D () Delete
Name: WILLIAMS, BRIDGETTE
Address: 2106 SCOTT STREET
City-St-Zip: LITTLE ROCK, AR 72208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT J COLEMAN

PRES

01/27/2009

Electronic Signature of Signing Officer or Director

Date