2002 UNIFORM BUSINESS REPORT (UBR)

May 19, 2002 8:00 am Secretary of State P01000103716 DOCUMENT # 1. Entity Name 05-19-2002 90050 008 ***150.00 ALPHA STAFFING INTERNATIONAL, INC. Principal Place of Business Mailing Address WORLD TRADE CENTER WORLD TRADE CENTER 1101 CHANNELSIDE DRIVE 1101 CHANNELSIDE DRIVE **TAMPA FL 33602** TAMPA FL 33602 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number Applied For 59-3751640 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAM) FL 33145 Zip Code City 8. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS CR2E034 (9/01) Change ☐ Addition TITLE ☐ Delete TITLE FURIGAY-DUDGEON, VIVIAN H NAME NAME 1101 CHANNELSIDE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33602** ☐ Change Addition ☐ Delete TITLE TITLE ۷D NAME FURIGAY, HENRY H NAME STREET ADDRESS STREET ADDRESS 1101 CHANNELSIDE DRIVE CITY-ST-ZIP CITY ST ZIP tampa Fl.33602 🛴 ☐ Addition Change ☐ Delete TITLE ۷D NAME NAME FURIGAY, ELVIS H STREET ADDRESS STREET ADDRESS 1101 CHANNELSIDE DRIVE CITY-ST-7IP CITY-ST-ZIP TAMPA FL 33602 ☐ Change ☐ Addition ☐ Delete TITLE TITLE SD NAME NAME Quides, amelia f STREET ADDRESS 1101 CHANNELSIDE DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33602 ☐ Delete TITLE Change ☐ Addition TITLE TD NAME FURIGAY, RODERICK H STREET ADDRESS STREET ADDRESS 1101 CHANNELSIDE DRIVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33602 Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an aggress, with all other like empowered.

FILED