

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000161340

FILED
Nov 26, 2005
Secretary of State

Entity Name: OMG SERVICES CORPORATION

Current Principal Place of Business:

4344 NW 9TH AVE
POMPANO BEACH, FL 33064

New Principal Place of Business:

4344 NW 9TH AVE
POMPANO BEACH, FL 33064 US

Current Mailing Address:

4344 NW 9TH AVE
POMPANO BEACH, FL 33064

New Mailing Address:

4344 NW 9TH AVE
POMPANO BEACH, FL 33064 US

FEI Number: 20-1969360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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: OLDAIR JOSE DE OLIVEIRA

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: PSD () Delete
Name: DE OLIVEIRA, OLDAIR JOSE
Address: 4344 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD () Delete
Name: DOS SANTOS OLIVEIRA, GLEICIONE M
Address: 4344 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: TD () Delete
Name: DE OLIVEIRA, JOVAN BATISTA
Address: 4344 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: DE OLIVEIRA, OLDAIR JOSE
Address: 4344 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: VD (X) Change () Addition
Name: DOS SANTOS OLIVEIRA, GLEICIONE M
Address: 4344 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: TD (X) Change () Addition
Name: DE OLIVEIRA, JOVAN BATISTA
Address: 4344 NW 9TH AVE
City-St-Zip: POMPANO BEACH, FL 33064 US

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

SIGNATURE: OLDAIR JOSE DE OLIVEIRA

P,D

11/26/2005

Electronic Signature of Signing Officer or Director

Date