2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 28, 2007
Secretary of State

DOCUMENT# P06000022508

Entity Name: WORKERS'COMPENSATION SERVICES GROUP,INC.

Current Principal Place of Business:

2125 TURKEY OAK CT.
PH
OVIEDO, FL 32766 US

New Principal Place of Business:

2125 TURKEY OAK CT.
OVIEDO, FL 32766 US

Current Mailing Address:

2125 TURKEY OAK CT.
PH
OVIEDO, FL 32766 US

New Mailing Address:

2125 TURKEY OAK CT.
OVIEDO, FL 32766 US

FEI Number: 41-2195212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VEGA, GLADYS R
2125 TURKEY OAK CT.
PH
OVIEDO, FL 32766 US

Name and Address of New Registered Agent:

VEGA, GLADYS R
2125 TURKEY OAK CT.
OVIEDO, FL 32766 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: _____ 03/28/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VEGA, HECTOR
Address: 2125 TURKEY OAK CT
City-St-Zip: OVIEDO, FL 32766 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition
Name: VEGA, JASON
Address: 2125 TURKEY OAK CT
City-St-Zip: OVIEDO, FL 32766 US

Title: T ( ) Change (X) Addition
Name: VEGA, JEFFREY
Address: 2125 TURKEY OAK CT
City-St-Zip: OVIEDO, FL 32766

I hereby certify that the information supplied with this filing does not qualify for the 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: JASON VEGA VP 03/28/2007
Electronic Signature of Signing Officer or Director — Date