2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# P06000037303

Entity Name: ALFA & OMEGA PROFESSIONAL SERVICES, CORP.

Current Principal Place of Business:

157 SW SEA LION RD
PORT ST LUCIE, FL 34953 US

New Principal Place of Business:

4287 CYPRESS LANE
WEST PALM BEACH, FL 33406 US

Current Mailing Address:

157 SW SEA LION RD
PORT ST LUCIE, FL 34953 US

New Mailing Address:

4287 CYPRESS LANE
WEST PALM BEACH, FL 33406 US

FEI Number: 20-4499643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YAX-LACAN, CRUZ B
157 SW SEA LION RD
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

YAX-LACAN, CRUZ B
4287 CYPRESS LANE
WEST PALM BEACH, FL 33406 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: CRUZ B. YAX-LACAN 05/08/2009
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: P ( ) Delete
Name: YAX-LACAN, CRUZ B
Address: 157 SW SEA LION RD
City-St-Zip: PORT ST LUCIE, FL 34953 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: YAX-LACAN, CRUZ B
Address: 4287 CYPRESS LANE
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: VP ( ) Change (X) Addition
Name: ARAUJO, EUDER A
Address: 4287 CYPRESS LANE
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: D ( ) Change (X) Addition
Name: BRITO, JOSE R
Address: 4287 CYPRESS LANE
City-St-Zip: WEST PALM BEACH, FL 33406 US

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

SIGNATURE: CRUZ B. YAX-LACAN PD 05/08/2009
Electronic Signature of Signing Officer or Director Date