2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120458

Entity Name: IN MOTION STAFFING INC.

FILED Aug 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

291 NW 151 AVE

PEMBROKE PINES, FL 33028 US

Current Mailing Address: New Mailing Address:

291 NW 151 AVE

PEMBROKE PINES, FL 33028 US

FEI Number: 20-5572475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RIVERA, MARIA N
291 NW 151 AVE
PEMBROKE PINES, FL 33028 US
SILVA'S ENTERPRISE, INC.
5220 S UNIVERSITY DR
SUITE C-102

DAVIE, FL 33328 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: FERNANDO SILVA 08/15/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PD (X) Change () Addition

 Name:
 RIVERA, MARIA N
 Name:
 RIVERA, MARIA N

 Address:
 291 NW 151 AVE
 Address:
 291 NW 151 AVE

City-St-Zip: PEMBROKE PINES, FL 33028 US City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: () Delete Title: VPD () Change (X) Addition

 Name:
 Name:
 VILLARRAGA, ALVARO E

 Address:
 Address:
 291 NW 151 AVE

City-St-Zip: City-St-Zip: PEMBROKE PINES, FL 33028 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: MARIA N. RIVERA PD 08/15/2007