2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000154989

Entity Name: ALPHA OMEGA TEMPORARY SERVICES, INC.

FILED Oct 21, 2008 Secretary of State

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

6073 NW 167TH STREET SUITE C 10

MIAMI LAKES, FL 33015 US

Current Mailing Address: New Mailing Address:

US

6073 NW 167TH STREET SUITE C 10 MIAMI LAKES, FL 33015

FEI Number: 20-8065265 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

AKANNI, ADEOLA
6073 NW 167TH STREET
SUITE C 10
MIAMI LAKES, FL 33015 US

AKANNI, BABATUNDE
6073 NW 167TH STREET
SUITE C 10
MIAMI LAKES, FL 33015 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: AKANNI BABATUNDE 10/21/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: AKANNI, ADEOLA Name: AKANNI, BABATUNDE

Address: 6073 NW 167TH STREET, SUITE C 10 Address: 6073 NW 167TH STREET, SUITE C 10

City-St-Zip: MIAMI LAKES, FL 33015 US City-St-Zip: MIAMI LAKES, FL 33015 US

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

Name: Name: AKANNI, SHERRY

Address: Address: 6073 NW 167TH STREET, SUITE C 10

City-St-Zip: City-St-Zip: MIAMI LAKES, FL 33015 US

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

Name: Name: AKANNI, ADEOLA

Address: 6073 NW 167TH STREET, SUITE C 10

City-St-Zip: City-St-Zip: MIAMI LAKES, FL 33015 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: AKANNI BABATUNDE PRES 10/21/2008

Electronic Signature of Signing Officer or Director

Date