

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096069

Entity Name: OMEGA ALL SERVICES, INC

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

610 NORTH 14TH STREET
LEESBURG, FL 34748 US

New Principal Place of Business:

5780 CARRIER DRIVE
160
ORLANDO, FL 32819 US

Current Mailing Address:

610 NORTH 14 TH STREET
LEESBURG, FL 34748 US

New Mailing Address:

5780 CARRIER DRIVE
160
ORLANDO, FL 32819 US

FEI Number: 26-0794350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERA, SEVERINA C
6220 S. OBT
603
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

RIVERA, SEVERINA C
6220 S. ORANGE BLOSSOM TRAIL
603
ORLANDO, FL 32809 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:

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DOS SANTOS, ANTONIO J A D
Address: LRG S. FRANCISCO DE PAULA, 26-804/805
City-St-Zip: RIO DE JANEIRO, RJ 20051-070 BR

Title: DT () Delete
Name: DOS SANTOS, ALBERTO M
Address: 3278 VILLA STRADA WAY
City-St-Zip: ORLANDO, FL 32835 US

Title: DS () Delete
Name: GUIMARAES, FLAVIA
Address: 3278 VILLA STRADA WAY
City-St-Zip: ORLANDO, FL 32835 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ALBERTO M. DOS SANTOS

DT

01/13/2009

Electronic Signature of Signing Officer or Director

Date