

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000015306

Entity Name: V.N.W. SERVICES, CORP.

FILED
Oct 19, 2007
Secretary of State

Current Principal Place of Business:

4100 EVANS AVENUE
SUITE 10
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

P.O BOX 7386
FORT MYERS, FL 33911

New Mailing Address:

FEI Number: 59-3777732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVEIRA, WASHINGTON A
5353 HAWKS LANDING DRIVE
APT. # 107
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

OLIVEIRA, WASHINGTON A
1801 ACADEMY BLVD
CAPE CORAL, FL 33990 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: WASHINGTON OLIVEIRA

10/19/2007

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:

Title: PD () Delete
Name: OLIVEIRA, WASHINGTON A
Address: 5353 HAWKS LANDING DRIVE # 107
City-St-Zip: FORT MYERS, FL 33907

Title: VD () Delete
Name: FERREIRA, DENISE F
Address: 5353 HAWKS LANDING DRIVE # 107
City-St-Zip: FORT MYERS,, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OLIVEIRA, WASHINGTON A
Address: 1801 ACADEMY BLVD
City-St-Zip: CAPE, CORAL, FL 33990

Title: VD (X) Change () Addition
Name: FERREIRA, DENISE F
Address: 1801 ACADEMY BLVD
City-St-Zip: CAPE, CORAL, FL 339990

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: WASHINGTON OLIVEIRA

PD

10/19/2007

Electronic Signature of Signing Officer or Director

Date