

2006 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Sep 19, 2006
Secretary of State**

DOCUMENT# P05000065389

Entity Name: A.F.S.B.O INC.

Current Principal Place of Business:

2107 E OSBORNE AVE
FIRST FLOOR
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11032
TAMPA, FL 33680 US

New Mailing Address:

FEI Number: 20-1883538 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LARRY, DWAYNE
2107 E OSBORNE AVE
STE 2
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

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: DWAYNE LARRY

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: NAILS-LARRY, TAMMY
Address: P.O. BOX 11032
City-St-Zip: TAMPA, FL 33680 US

Title: T () Delete
Name: PROFESSIONAL PAYCHEK, S
Address: 2107 E OSBORNE AVE STE2
City-St-Zip: TAMPA, FL 33610 US

Title: S () Delete
Name: ADVOCATE FOR SMALL B, BUSINESS OWNERS
Address: 2017 E BROAD ST
City-St-Zip: TAMPA, FL 33610 US

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

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:

Title: VP () Change (X) Addition
Name: RECONSTRUCTIONS BY L, ARRY
Address: 1022 E MLK BLVD
City-St-Zip: TAMPA, FL 33603 US

I hereby certify that the information supplied with this filing does not qualify for the 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: TAMMY N LARRY

Electronic Signature of Signing Officer or Director

P

09/19/2006

Date