

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000146179

**FILED**  
**Oct 05, 2006**  
**Secretary of State**

**Entity Name:** A2Z APPLIANCE SERVICES, CORP

**Current Principal Place of Business:**

22100 MAGESTIC WOODS WAY  
2102  
PALM BEACH, FL 33428

**New Principal Place of Business:**

22100 MAGESTIC WOODS WAY  
2102  
BOCA RATON, FL 33428

**Current Mailing Address:**

21091 NW 22ND AVE  
SUITE # 232  
MIAMI GARDENS, FL 33056

**New Mailing Address:**

22100 MAJESTIC WOODS  
BOCA RATON, FL 33428 US

**FEI Number:** 84-1693270

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AHMED, AHMED A  
21091 NW 22ND AVE  
SUITE # 232  
MIAMI GARDENS, FL 33056 US

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

AHMED, AHMED A  
22100 MAJESTIC WOODS WAY  
BOCA RATON, FL 33428 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: AHMED A AHMED

10/05/2006

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: AHMED, AHMED A  
Address: 21091 NW 22ND AVE SUITE# 232  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: VP ( ) Delete  
Name: HASHAM, SAJIDA A  
Address: 21091 NW 22ND AVE  
City-St-Zip: MIAMI GARDENS, FL 33056

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: AHMED, AHMED A  
Address: 22100 MAJESTIC WOODS WAY  
City-St-Zip: BOCA RATON, FL 33428

Title: VP (X) Change ( ) Addition  
Name: HASHAM, SAJIDA A  
Address: 22100 MAJESTIC WOODS WAY  
City-St-Zip: BOCA RATON, FL 33428

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: AHMED A AHMED

PRES

10/05/2006

Electronic Signature of Signing Officer or Director

Date