

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000116659

FILED
Oct 30, 2008
Secretary of State

Entity Name: INTERNATIONAL EMPLOYMENT CONSULTANTS, INC.

Current Principal Place of Business:

5008 W. LINEBAUGH AVE.
SUITE 25
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

5008 W. LINEBAUGH AVE.
SUITE 25
TAMPA, FL 33624

New Mailing Address:

FEI Number: 26-1322891

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMO, LILIAN
3311 W. CARACAS ST.
TAMPA, FL 33614 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: LILIAN ROMO

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: ROMO, RICARDO R
Address: 10019 PARLEY DR
City-St-Zip: TAMPA, FL 33626

Title: VP () Delete
Name: ROMO, FABIAN F
Address: 11016 WINGATE DR.
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: FABIAN ROMO

VP

10/30/2008

Electronic Signature of Signing Officer or Director

Date