2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 22, 2009
Secretary of State

DOCUMENT# P08000101656

Entity Name: APPLIED ADVERTISING SOLUTIONS INC.

Current Principal Place of Business:

1712 PARKWAY CT
GREENACRES, FL 33413

New Principal Place of Business:

12490 PINEACRE LANE
WELLINGTON, FL 33414

Current Mailing Address:

1712 PARKWAY CT
GREENACRES, FL 33413

New Mailing Address:

12490 PINEACRE LANE
WELLINGTON, FL 33414

FEI Number: 94-3453688 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROMAN, SAMUEL
1712 PARKWAY COURT
GREENACRES, FL 33413 US

Name and Address of New Registered Agent:

ROMAN, SAMUEL
12490 PINEACRE LANE
WELLINGTON, FL 33414 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: SAM ROMAN 10/22/2009
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: ROMAN, SAMUEL
Address: 1712 PARKWAY COURT
City-St-Zip: GREENACRES, FL 33413

Title: DIR ( ) Delete
Name: ROMAN, SAMUEL
Address: 1712 PARKWAY COURT
City-St-Zip: GREENACRES, FL 33413

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: ROMAN, SAMUEL
Address: 12490 PINEACRE LANE
City-St-Zip: WELLINGTON, FL 33414 US

Title: VP,D (X) Change ( ) Addition
Name: ROMAN, SAMUEL
Address: 12490 PINEACRE LANE
City-St-Zip: WELLINGTON, FL 33414 US

Title: T,D ( ) Change (X) Addition
Name: ROMAN, SAMUEL
Address: 12490 PINEACRE LANE
City-St-Zip: WELLINGTON, FL 33414 US

Title: S,D ( ) Change (X) Addition
Name: ROMAN, SAMUEL
Address: 12490 PINEACRE LANE
City-St-Zip: WELLINGTON, FL 33414 US

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: SAMUEL ROMAN P,D 10/22/2009
Electronic Signature of Signing Officer or Director Date