

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000000337

FILED
Feb 28, 2005
Secretary of State

Entity Name: INFO CENTER SERVICES, INC.

Current Principal Place of Business:

5920 SEABIRD DR.
GULFPORT, FL 33707

New Principal Place of Business:

2814 KIPPS COLONY DR
GULFPORT, FL 33707

Current Mailing Address:

5920 SEABIRD DR.
GULFPORT, FL 33707

New Mailing Address:

2814 KIPPS COLONY DR
GULFPORT, FL 33707

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHATZ, JIM
5920 SEABIRD DR.
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

SHATZ, JIM
2814 KIPPS COLONY DR
GULFPORT, FL 33707 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: JIM SHATZ

02/28/2005

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: CP () Delete
Name: SHATZ, JIM
Address: 5920 SEABIRD DR.
City-St-Zip: GULFPORT, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: SHATZ, JIM
Address: 2814 KIPPS COLONY DR
City-St-Zip: GULFPORT, FL 33707

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JIM SHATZ

CP

02/28/2005

Electronic Signature of Signing Officer or Director

Date