## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000007071

Entity Name: ALLEN CONSULTING SERVICES, INC.

FILED Oct 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1727 SAN BENITO WAY #3 4144 CEDAR AVENUE

WEST PALM BEACH, FL 33401 PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

1727 SAN BENITO WAY #3 4144 CEDAR AVENUE

WEST PALM BEACH, FL 33401 PALM BEACH GARDENS, FL 33410

FEI Number: 20-5422693 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ALLEN, RUSSELL D
1727 SAN BENITO WAY #3

ALLEN, RUSSELL D
4144 CEDAR AVENUE

WEST PALM BEACH, FL 33401 US PALM BEACH GARDENS, FL 33410 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: RUSSELL D. ALLEN 10/05/2007

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 ALLEN, RUSSELL D
 Name:
 ALLEN, RUSSELL D

 Address:
 1727 SAN BENITO WAY #3
 Address:
 4144 CEDAR AVENUE

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VCDS () Delete Title: VCDS (X) Change () Addition

Name: ALLEN, SAMANTHA E Name: ALLEN, SAMANTHA E Address: 1727 SAN BENITO WAY #3 Address: 4144 CEDAR AVENUE

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VPT ( ) Delete Title: VPT (X) Change ( ) Addition

Name: ALLEN, SAMANTHA E Name: ALLEN, SAMANTHA E
Address: 1727 SAN BENITO WAY #3 Address: 4144 CEDAR AVENUE

City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: PALM BEACH GARDENS, FL 33410

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: SAMANTHA E. ALLEN VCDS 10/05/2007