

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F99000001150

FILED
Sep 26, 2005
Secretary of State

Entity Name: SAAD'S PROFESSIONAL SERVICES, INC.

Current Principal Place of Business:

5401 CORPORATE WOODS DR.
SUITE 300
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

3939 BEE CAVE ROAD
SUITE B-1
AUSTIN, TX 78746

New Mailing Address:

2600 VIA FORTUNA
SUITE 215
AUSTIN, TX 78746

FEI Number: 63-1052154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MICHAEL MCMAUDE, CEO

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: CEO () Delete
Name: MCMAUDE, MICHAEL A
Address: 3939 BEE CAVE ROAD, STE. B-1
City-St-Zip: AUSTIN, TX 78746

Title: CFO () Delete
Name: STEEL, ROBERT
Address: 3939 BEE CAVE ROAD, STE. B-1
City-St-Zip: AUSTIN, TX 78746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: MCMAUDE, MICHAEL A
Address: 2600 VIA FORTUNA, SUITE 215
City-St-Zip: AUSTIN, TX 78746

Title: CFO (X) Change () Addition
Name: STEEL, ROBERT
Address: 2600 VIA FORTUNA, SUITE 215
City-St-Zip: AUSTIN, TX 78746

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: MICHAEL MCMAUDE

CEO

09/26/2005

Electronic Signature of Signing Officer or Director

Date