

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G26751

FILED
Jun 20, 2007
Secretary of State

Entity Name: COMPUTER BASED SYSTEMS AND SERVICES, INCORPORATED

Current Principal Place of Business:

CBSS
PO BOX 5641
LAKE WORTH, FL 33466

New Principal Place of Business:

324 NEW BURY PORT AVE
ALMONTE SPRINGS, FL 32701

Current Mailing Address:

CBSS
PO BOX 5641
LAKE WORTH, FL 33466

New Mailing Address:

COMPUTER BAES
324 NEW BURY PORT AVE
ALMONTE SPRINGS, FL 32701

FEI Number: 26-0318425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIBENEDITTO, MR. MICHAEL A.
6062 PALM BREEZES DR
LANTANA, FL 33462 US

Name and Address of New Registered Agent:

TORN, MELBARN
324 NEW BURY PORT AVE
ALMONTE SPRINGS, FL 32701 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: MELBARN TORN

06/20/2007

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:

Title: DP () Delete
Name: DIBENEDITTO, MICHAEL, A.
Address: 6062 PALM BREEZES DR
City-St-Zip: LANTANA, FL 33462

Title: VP (X) Delete
Name: DIBENEDITTO, MARY
Address: 6062 PALM BREEZES DR
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TORN, MELBARN
Address: 324 NEW BURY PORT AVE
City-St-Zip: ALMONTE SPRINGS, FL 32701

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: MELBARN TORN

P

06/20/2007

Electronic Signature of Signing Officer or Director

Date