

**2004 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 05, 2004  
Secretary of State**

DOCUMENT# G54560

Entity Name: EDCO SERVICES, INC.

**Current Principal Place of Business:**

4211 MEADOW HILL DRIVE  
TAMPA, FL 33624 US

**New Principal Place of Business:**

4211 MEADOW HILL DRIVE  
TAMPA, FL 33618 US

**Current Mailing Address:**

P.O. BOX 270574  
TAMPA, FL 336880574 US

**New Mailing Address:**

4211 MEADOW HILL DRIVE  
TAMPA, FL 33618 US

FEI Number: 06-0982477

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COHEN, EDWARD  
4211 MEADOW HILL DRIVE  
TAMPA, FL 33618 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:

\_\_\_\_\_  
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: PTD ( ) Delete  
Name: COHEN, EDWARD,  
Address: 4211 MEADOW HILL DRIVE  
City-St-Zip: TAMPA, FL

Title: S ( ) Delete  
Name: COHEN, FREYDA H.,  
Address: 4211 MEADOW HILL DRIVE  
City-St-Zip: TAMPA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: COHEN, FREYDA H.,  
Address: 4211 MEADOW HILL DRIVE  
City-St-Zip: TAMPA, FL 33618 US

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: EDWARD COHEN

PRES

11/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date