

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L52261

FILED
Apr 05, 2007
Secretary of State

Entity Name: TAMiami AIRPORT SERVICE CENTER, INC.

Current Principal Place of Business:

13595 SW 137 AVE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13595 SW 137 AVE
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-0183206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOULOS, JAMES
13237 SW 44TH LANE
MIAMI, FL 33175 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: JAMES BOULOS

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: PD () Delete
Name: BOULOS, JAMES
Address: 13237 SW 44TH LANE
City-St-Zip: MIAMI, FL 33175

Title: VD () Delete
Name: BOULOS, VICTOR JR.
Address: 4130 SW 124TH AVE
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: BOULOS, RICHARD
Address: 4130 SW 124TH AVE
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: BOULOS, MARIO
Address: 4130 SW 124TH AVE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES BOULOS

PD

04/05/2007

Electronic Signature of Signing Officer or Director

Date