2004 FOR PROFIT CORPORATION REINSTATEMENT

	1/211/01/	· · · · · · · · · · · · · · · · · · ·			-			
DOCUMENT # P0000014998 1. Entity Name AMG COMPUTER CONSULTING SERVICES, INC.			,			05 MAF	FILED R 30 PM 4: ;	-
Principal Place of Business		Mailing Address				SECRET	ANT STATI	
		1375 PLUMOSA WAY			1	TALLATIA	70 EE - 01 M H	<u>-</u>
1375 PLUMOSA WAY Weston, Fl 33327		WESTON, FL 33327		_	M O	TACICATIF	COSCE, FLURIL	<i>I</i> A
11251011,12 00027		11251011,72 00027			*			
2. Principal Place of Business		3. Mailing Address						
	101 1188				Arts date	. n <i>d</i>	3783 Ot 53 May 6: 4 444	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			10222004	AREN P (A)	CHZEO9841/04) <i>04</i> ~05
City P State		City II Chara			+			
City & State		City & State			4. FEI Numb			Not Applicable
Zip C	ountry	Zip	Country				1 ¢0.75 A	
		14	0001111		5. Certificate	of Status Desired	Fee Requi	
6. Name and	Address of Current I	Registered Agent	' 		7. Name and	Address of New R		
			N	ame	·		······································	
GUZMAN, ANDRES M					(0.0 D. N			
1375 PLUMOSA WAY			S	treet Address	(P.O. Box Numb	er is Not Acceptable	e)	
WESTON, FL 33327								•
),							
	Λ.	<u>k</u>	0	ity			FL Zip Co	de
8. The above named entity sub	mits this statement for	r the purpose of changing its	registered o	ffice or registe	red agent, or bo	th, in the State of Flo	orida. I am familiar with	n, and accept
the obligations of registered					•			
SION AT LIDE	11/	l.						
SIGNATURE Signature, typed or prin	ted name of registered agent a	od tide it application. (NOT	E: Registered Ag	ent signature requ	red when reinstating		DATE	—— [.
		-// < -				-		-
FILE NOW!!! FEE After January 1, 2005, I		U				In accordance v corporation did	vith s. 607.193(2)(b) not receive the prior	, F.S., the notice.
10.	OFFICERS AND I	DIRECTORS	11,		ADDITIONS	CHANGES TO OFF	ICERS AND DIRECTO	PS IN 11
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			CITY-ST-Z	IP .				j
STREET ADDRESS GITY-ST-ZIP	rmation supplied with	this filing opes not qualify fo	r the exempti		ection 119.07(3)	i), Florida Statutes. I	further certify that the	information
STREET ADDRESS GITY-ST-ZIP	rmation supplied with supplemental report is server or trustee empo	this filling does not quality to true and accurate and that i	r the exempti		ection 119.07(3) same legal effect	i), Florida Statutes, I it as if made under o	further certify that the path; that I am an office appears in Rlock 10	information er or director or Block 11 if
STREET AODRESS CITY-ST-ZIP	celver or trustee empo ont with an address, w	true and accurate and that i wered to execute this report vith all other like empowered	r the exempti		ection 119.07(3) same legal effec 7, Florida Statute	i), Florida Statutes. I t as if made under c s; and that my name	further certify that the path; that I am an office appears in Block 10	information er or director or Block 11 if
STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the info indicated on this report or so fithe corporation or the rechanged, or on an attachm	rmshipn supplied with supplemental report is septer or trustee empo on with an address, w	true and accurate and that i wered to execute this report vith all other like empowered	r the exempti		ection 119.07(3) same legal effec 7, Florida Statute	i), Florida Statutes. I et as if made under c is; and that my name	further certify that the bath; that I am an office appears in Block 10	information er or director or Block 11 if
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