

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000023429

FILED
Jan 14, 2005
Secretary of State

Entity Name: ACCURATE COMMUNICATION - COUNSELING SERVICES, INC.

Current Principal Place of Business:

5154 OKEECHOBEE BLVD
111
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

5154 OKEECHOBEE BLVD
111
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 65-0983757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOURSIQUOT, NICOLE
5154 OKEECHOBEE BLVD
111
WEST PALM BEACH, FL 33417 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: NICOLE BOURSIQUOT

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOURSIQUOT, PATRICK
Address: 5154 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33417

Title: V () Delete
Name: BOURSIQUOT, NICOLE
Address: 5154 OKEECHOBEE BLVD
City-St-Zip: WEST PALM BEACH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: NICOLE BOURSIQUOT

V

01/14/2005

Electronic Signature of Signing Officer or Director

Date