

2007 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 24, 2007
Secretary of State**

DOCUMENT# P01000107201

Entity Name: PRESTIGE BUSINESS SOLUTIONS, INC.

Current Principal Place of Business:

New Principal Place of Business:

19518 LAKE OSCEOLA LANE
ODESSA, FL 33556

Current Mailing Address:

New Mailing Address:

19518 LAKE OSCEOLA LANE
ODESSA, FL 33556

FEI Number: 59-3758780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ADAMS, LARRY G
19518 LAKE OSCEOLA LANE
ODESSA, FL 33556 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: LARRY ADAMS

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ADAMS, LARRY PRES
Address: 19518 LAKE OSCEOLA LANE
City-St-Zip: ODESSA, FL 33556

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

Title: CFO () Delete
Name: ADAMS, TINA CFO
Address: 19518 LAKE OSCEOLA LANE
City-St-Zip: ODESSA, FL 33556

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: LARRY ADAMS

PD

10/24/2007

Electronic Signature of Signing Officer or Director

Date