

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000032486

Entity Name: A-1 PROFESSIONALS, INC.

FILED
Jun 25, 2007
Secretary of State

Current Principal Place of Business:

5200 N.W. 43RD STREET, #102
PMB 279
GAINESVILLE, FL 32606

New Principal Place of Business:

626 RIVERWOOD DR
GAINESVILLE, FL 32536

Current Mailing Address:

5200 N.W. 43RD STREET, #102
PMB 279
GAINESVILLE, FL 32606

New Mailing Address:

626 RIVERWOOD DR
CRESRVIEW, FL 32536

FEI Number: 65-0715155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KALIPATNAPU, SIVAPRASAD
7945 N.W. 49TH WAY
GAINESVILLE, FL 326535139 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: SIVAPRASAD KALIPATNAPU

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: D () Delete
Name: KALIPATNAPU, SIVAPRASAD
Address: 7945 N.W. 49TH WAY
City-St-Zip: GAINESVILLE, FL 326535139

Title: D () Delete
Name: PRASAD, DEEPA K
Address: 7945 N.W. 49TH WAY
City-St-Zip: GAINESVILLE, FL 326535139

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 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: SIVAPRASAD KALIPATNAPU

D

06/25/2007

Electronic Signature of Signing Officer or Director

Date