2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P02000089363

Entity Name: ALL FLORIDA MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

1971 W MCNAB ROAD SUITE 2
POMPANO BEACH, FL 33069

New Principal Place of Business:

1971 W MCNAB RD SUITE 2
POMPANO BEACH, FL 33069

Current Mailing Address:

1971 W MCNAB ROAD SUITE 2
POMPANO BEACH, FL 33069

New Mailing Address:

1971 W MCNAB RD SUITE 2
POMPANO BEACH, FL 33069

FEI Number: 22-3865968 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOULD, JOEL L
1971 W MCNAB RD SUITE 2
POMPANO BEACH, FL 33069 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: JOEL L. GOULD

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GOULD, JOEL L
Address: 8121 SW 6 COURT
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GOULD, JOEL L
Address: 1971 W MCNAB RD SUITE 2
City-St-Zip: POMPANO BEACH, FL 33069

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: JOEL L. GOULD PD 04/30/2009

Electronic Signature of Signing Officer or Director — Date