

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000124436

Entity Name: PROBIZ INVESTMENTS, INC.

FILED
Feb 26, 2009
Secretary of State

Current Principal Place of Business:

72 NW 162ND STREET
N MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

PO BOX 640725
MIAMI, FL 33164

New Mailing Address:

14040 BISCAYNE BLVD APT. 609
MIAMI, FL 33181

FEI Number: 64-1160463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PB&A FINANCIAL SERVICES, CORP.
174 NE 96 ST
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

PROBIZ ACCOUNTING & TAX SOLUTIONS
15321 NE 11TH CT
MIAMI, FL 33162 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: GINETTE DULCIO

02/26/2009

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: PD () Delete
Name: DULCIO, WILDIEU
Address: 72 NW 162ND STREET
City-St-Zip: N MIAMI, FL 33169

Title: VD () Delete
Name: DULCIO, GINETTE
Address: 72 NW 162ND STREET
City-St-Zip: N MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DULCIO, GINETTE
Address: 14040 BISCAYNE BLVD APT. 609
City-St-Zip: N MIAMI, FL 33181

Title: VD (X) Change () Addition
Name: DULCIO, SUZIANE
Address: 72 NW 162ND STR
City-St-Zip: N MIAMI, FL 33169

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: GINETTE DULCIO

PD

02/26/2009

Electronic Signature of Signing Officer or Director

Date