2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 13, 2008
Secretary of State

DOCUMENT# P02000130135

Entity Name: AYS FINANCIAL SERVICES, INC

Current Principal Place of Business:

474 NE 125TH STREET
NORTH MIAMI, FL 33161 US

New Principal Place of Business:

Current Mailing Address:

474 NE 125TH STREET
NORTH MIAMI, FL 33161 US

New Mailing Address:

FEI Number: 57-1136769 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAINT-HILAIRE, ANIEL
18570 NW 22 CT
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

SAINT-HILAIRE, ANIEL
3007 CARDASSI DRIVE
OCOEE, FL 34761 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: ANIEL SAINT-HILAIRE 10/13/2008
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: P ( ) Delete
Name: SAINT-HILAIRE, ANIEL
Address: 18570 NW 22 CT
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: V ( ) Delete
Name: SAINT-HILAIRE, KEZIA G
Address: 535 NE 138TH STREET
City-St-Zip: MIAMI, FL 33161 US

Title: SEC (X) Delete
Name: SAINT-HILAIRE, YOLA G
Address: 18570 NW 22 CT
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: BM (X) Delete
Name: OXIL, BERTHIDE
Address: 6754 KNIGHTWOOD DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: TREA (X) Delete
Name: OXIL, CHERIEZ
Address: 691 ENCINO WAY
City-St-Zip: ALTAMONTE SPRINGS, FL US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SAINT-HILAIRE, ANIEL
Address: 3007 CARDASSI DRIVE
City-St-Zip: OCOEE, FL 34761 US

Title: VP (X) Change ( ) Addition
Name: SAINT-HILAIRE, KEZIA G
Address: 3007 CARDASSI DRIVE
City-St-Zip: OCOEE, FL 34761 US

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

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: ANIEL SAINT-HILAIRE P 10/13/2008
Electronic Signature of Signing Officer or Director Date