2008 FOR PROFIT CORPORATION REINSTATEMENT

SIGNATURE:

1. Entity Nam HB SPEC	CIAL SERVICES, INC. se of Business 29TH PLACE		FILED 09 JAN -6 PM 5: 29 SECRETARY OF STATE TALLAHASSEE, FLORIDA							
Principal Place of Business - No P.O. Box # Mailing Address			,							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			1126 702	! እ የ ጅሞክ ሞሮ ፤		(1/07)	17SZ	
City & State		City & State			4. FEI Number Applied For 84-1616961 Not Applicable					
Zıp	Country Zip Co		Coun	try		of Status Desired		75 Add Require	titional	
	6. Name and Address of Current	agistered Agent		<u> </u>	7. Name and	Address of New Re			-	
					Name					
HALLBACK, BRUCE D 18831 N.W. 29TH PLACE				Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL 33056										
			City FL Zip Code							
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE										
FILE NOW!!! FEE IS \$150.00 After January 1, 2009, Fee will be \$300.00						In accordance wi corporation did n				
10. OFFICERS AND DIRECTORS 11.			11.		ADDITIONS.	I /CHANGES TO OFFIC	CERS AND DIRE	CTORS	S IN 11	
TITLE	PST	☐ Delete	TITLE	:				Change	Addition	
NAME STREET ADDRESS	HALLBACK, BRUCE D 18831 N.W. 29TH PLACE			ET ADDRESS	n 20	013968 090009	1912	o Sa n	ıñ	
CITY-ST-ZIP				-ST-ZIP	041 001	00 01010				
NAME STREET ADDRESS CITY-ST-ZIP	. NAM			l l			LI.	Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						Change	Addition	
TITLE NAME STREET ADDRESS CHY-ST-ZIP		☐ Delete						hange	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with 30 address, with all other like empowered.										