2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000076167

Entity Name: ABRA SERVICES GROUP, INC

FILED Dec 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4535 HAMPSHIRE ROAD 5303 ARCHSTONE DR TAMPA, FL 33634 TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

4535 HAMPSHIRE ROAD 5303 ARCHSTONE DR TAMPA, FL 33634 TAMPA, FL 33634

FEI Number: 57-1178774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SINRAM, ARNO E SINRAM, ARNO E 4535 HAMPSHIRE ROAD 5303 ARCHSTONE DR TAMPA, FL 33634 TAMPA, FL 33634

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: ARNO E SINRAM 12/19/2006

> 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:

Name:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete

SINRAM, ARNO E SINRAM, ARNO E Name: Name: 4535 HAMPSHIRE ROAD 5303 ARCHSTONE DR Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33634

Title: Title: () Delete (X) Change () Addition

Name: SINRAM, ARNO C Name: SINRAM, ARNO C 4535 HAMPSHIRE ROAD 5303 ARCHSTONE DR Address: Address: TAMPA, FL 33634 TAMPA, FL 33634 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete

SINRAM, ARNO E SINRAM, ARNO E Name: Name: 4535 HAMPSHIRE ROAD 5303 ARCHSTONE DR Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33634

Title: () Delete Title: (X) Change () Addition

SINRAM, ARNO C SINRAM, ARNO C Name: Address: 4535 HAMPSHIRE ROAD Address: 5303 ARCHSTONE DR City-St-Zip: City-St-Zip: TAMPA, FL 33634 TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the 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.

Ρ SIGNATURE: ARNO E SINRAM 12/19/2006