2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
May 24, 2006
Secretary of State

DOCUMENT# P03000096518

Entity Name: ALL SERVICE & MAINTENANCE CORP.

Current Principal Place of Business:

17012 NW 19 STREET
PEMBROKE PINES, FL 33028

New Principal Place of Business:

1120 NE 10 STREET APT 5
HALLANDALE, FL 33009 FL

Current Mailing Address:

17012 NW 19 STREET
PEMBROKE PINES, FL 33028

New Mailing Address:

1120 NE 10 STREET APT 5
HALLANDALE, FL 33009 FL

FEI Number: 20-0196692 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERNANDEZ, MANUEL E
220 71 STREET, #212
MIAMI BEACH, FL 33141 US

Name and Address of New Registered Agent:

AQUIJE, LUIS
1120 NE 10 STREET
5
HALLANDALE, FL 33009 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: LUIS AQUIJE 05/24/2006
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:

Title: PT ( ) Delete
Name: FERNANDEZ, MANUEL
Address: 17012 N.W. 19 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VS (X) Delete
Name: AQUIJE, LUIS
Address: 17012 NW 19 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: AQUIJE, LUIS
Address: 1120 NE 10 STREET APT 5
City-St-Zip: HALLANDALE, FL 33009 US

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

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.

SIGNATURE: LUIS AQUIJE P 05/24/2006
Electronic Signature of Signing Officer or Director Date