

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000017355

Entity Name: ALBY SERVICES, INC.

FILED
Feb 13, 2006
Secretary of State

Current Principal Place of Business:

1595 W 57TH TERRACE
HIALEAH, FL 33012

New Principal Place of Business:

4829 NW 183RD STREET
MIAMI, FL 33055

Current Mailing Address:

1595 W 57TH TERRACE
HIALEAH, FL 33012

New Mailing Address:

4829 NW 183RD STREET
MIAMI, FL 33055

FEI Number: 20-0443596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX DEFENSE CENTER, INC.
2350 W 84TH STREET
20
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

TAX DEFENSE CENTER, INC.
2350 W 84TH STREET
18
HIALEAH, FL 33016 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: ELYSABET MONTANEZ

02/13/2006

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: P () Delete
Name: CRUZ, FEDERICO A
Address: 1595 W 57TH TERRACE
City-St-Zip: HIALEAH, FL 33012

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REMEDIO, MARIA E
Address: 4829 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

Title: V.P. () Change (X) Addition
Name: GONZALEZ, ADIS
Address: 4829 NW 183RD STREET
City-St-Zip: MIAMI, FL 33055

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: MARIA E REMEDIO

P

02/13/2006

Electronic Signature of Signing Officer or Director

Date