2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000028314

Entity Name: EMANUEL GENERAL SERVICES, CORPORATION

FILED Dec 05, 2005 Secretary of State

EMANUEL SERVICES, SON SIGNA	
Current Principal Place of Business:	New Principal Place of Business:
1577 MATTHEW DR. #25 FORT MYES. FL 33907	3475 CLARK ROAD #274 SARASOTA, FL 34231
Current Mailing Address:	New Mailing Address:
1577 MATTHEW DR. #25 FORT MYES, FL 33907	3475 CLARK ROAD #274 SARASOTA, FL 34231
FEI Number: 20-0724498 FEI Number Applied For () FEI Num	nber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
TAX HOUSE CORPORATION 1261 E SAMPLE ROAD POMPANO BEACH, FL 33064 US	TAX HOUSE CORPORATION 11601 S CLEVELAND SUITE-6 FORT MYERS, FL 33907 US
The above named entity submits this statement for the purpose of in the State of Florida.	f changing its registered office or registered agent, or both,
SIGNATURE: TAX HOUSE CORPORATION	12/05/2005
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:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PD () Delete Name: OLIVEIRA, ARAMILDO C Address: 1577 MATTHEW DR. City-St-Zip: FORT MYES, FL 33907	Title: () Change () Addition Name: Address: City-St-Zip:
Title: () Delete Name: Address: City-St-Zip:	Title: S () Change (X) Addition Name: PINTO, JOSE M Address: 1577 MATTHEW DR. City-St-Zip: FORT MYERS, FL 33907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ARAMILDO C. OLIVEIRA P 12/05/2005