2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000109655

Entity Name: Z & R CLEANING SERVICES, INC.

FILED Aug 28, 2006 Secretary of State

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

164 N W 92ND AVE #203 135 N.W. 109TH AVENUE PEMBROKE PINES, FL 33178 BLDG 13 -303

PEMBROKE PINES, FL 33026

FEMORORE FINES, FL 3302

Current Mailing Address: New Mailing Address:

164 N W 92ND AVE #203 135 N.W. 109TH AVENUE PEMBROKE PINES, FL 33178 BLDG. 13-303

PEMBROKE PINES, FL 33026

FEI Number: 20-1449723 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:

NOAS, IRIS E RENTERIA, ZOBEIDA
164 N W 92ND AVE #203 135 N.W. 109TH AVENUE

PEMBROKE PINES, FL 33178 US BLDG. 13-303
PEMBROKE PINES, FL 33026 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: ZOBEIDA RENTERIA 08/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MORERA, RAUL
 Name:
 MORERA, RAUL

 Address:
 164 N W 92ND AVE #203
 Address:
 135 N.W. 109TH AVENUE

 City-St-Zip:
 PEMBROKE PINES, FL 33178
 City-St-Zip:
 PEMBROKE PINES, FL 33026

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

 Name:
 Name:
 RENTERIA, ZOBEIDA

 Address:
 Address:
 135 N.W. 109TH AVENUE

 City-St-Zip:
 City-St-Zip:
 PEMBROKE PINES, FL 33026

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: RAUL MORERA PRES 08/28/2006