2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 06, 2006
Secretary of State

DOCUMENT# P04000124624

Entity Name: A.H. PROCESSING SERVICE AND REAL ESTATE CORP.

Current Principal Place of Business:

2592 CLUBHOUSE CIR
204
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

2592 CLUBHOUSE CIR
204
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 52-2455347 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HUDSON, ANGELINE
2592 CLUBHOUSE CIR
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

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: ANGELINE HUDSON
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: HUDSON, ANGELINE
Address: 2592 CLUBHOUSE CIR
City-St-Zip: SARASOTA, FL 34232

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: MS ( ) Change (X) Addition
Name: HUDSON, ANGELINE
Address: 2592 CLUBHOUSE CIR # 204
City-St-Zip: SARASOTA, FL 34232 US

Title: MS ( ) Change (X) Addition
Name: HUDSON, ANGELINE
Address: 2592 CLUBHOUSE CIR # 204
City-St-Zip: SARASOTA, FL 34232

Title: MS ( ) Change (X) Addition
Name: HUDSON, ANGELINE
Address: 2592 CLUBHOUSE CIR # 204
City-St-Zip: SARASOTA, FL 34232

Title: MS ( ) Change (X) Addition
Name: HUDSON, ANGELIINE
Address: 2592 CLUBHOUSE CIR #204
City-St-Zip: SARASOTA, FL 34232

Title: MS ( ) Change (X) Addition
Name: HUDSON, ANGELINE
Address: 2592 CLUBHOUSE CIR #204
City-St-Zip: SARASOTA, FL 34232

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: ANGELINE HUDSON MS 10/06/2006
Electronic Signature of Signing Officer or Director — Date