2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000146441

City-St-Zip:

PORT ST. LUCIE, FL 34952

EXECUTIVE VALET AND PARKING SOLUTIONS. INC

FILED Jan 29, 2006 Secretary of State

| Entity Nar | ne: EXECUT | IVE VALET AND PARKING SOL | LUTIONS, INC. | | | | |
|---|---|---|---|---|---------------------------------|----------|--|
| Current Principal Place of Business: | | | New Principal Place of Business: | | | | |
| 702 SE CE PORT ST. | ELTIC AVE LUCIE, FL 34 | 4983 | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | | |
| PO BOX 80 PORT ST. | D14 LUCIE, FL 34 | 1952 | | | | | |
| FEI Number: | 20-1836239 | FEI Number Applied For () | FEI Number Not Appl | icable () | Certificate of Status Desired | I() | |
| Name and | Address of | Current Registered Agent: | Name and | Name and Address of New Registered Agent: | | | |
| 702 SE CE | R, STEVEN ELTIC AVE LUCIE, FL 34 | 4983 US | | | | | |
| | named entity of Florida. | submits this statement for the pu | urpose of changing i | ts registered | d office or registered agent, o | or both, | |
| SIGNATUR | RE: STEVEN | CHANDLER | | | | | |
| | Electro | nic Signature of Registered Ager | nt | Date | | | |
| | | 93(2)(b), F.S., the corporation did not g Trust Fund Contribution (). | receive the prior notic | e. | | | |
| | S AND DIREC | - ' ' | ADDITION | S/CHANGE | S TO OFFICERS AND DIR | ECTORS: | |
| Title: Name: Address: City-St-Zip: | D,P (CHANDLER, S PO BOX 8014 PORT ST. LUC | | Title: Name: Address: City-St-Zip: | | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D,VP (KENNEDY, RC 208 WALTON PORT ST. LUC | LAKES DRIVE | Title: Name: Address: City-St-Zip: | KENNEDY, F 1720 S.W. B | | | |
| Title: Name: Address: | D,S (HARRISON, M 2173 GASLIGH | | Title: Name: Address: | | () Change () Addition | | |

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.

City-St-Zip:

SIGNATURE: STEVEN CHANDLER D, P 01/29/2006