

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000022338

FILED
Oct 06, 2006
Secretary of State

Entity Name: SYLVESTER SERVICES INCORPORATED

Current Principal Place of Business:

104 CHAMPLAIN DR.
DELTONA, FL 32725

New Principal Place of Business:

183 HIBISCUS LN
DELTONA, FL 32738

Current Mailing Address:

104 CHAMPLAIN DR.
DELTONA, FL 32725

New Mailing Address:

183 HIBISCUS LN
DELTONA, FL 32738

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SYLVESTER, ESTHER
104 CHAMPLAIN DR.
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

SYLVESTER, ESTHER
183 HIBISCUS LN
DELTONA, FL 32738 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: ESTHER SYLVESTER

10/06/2006

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: SYLVESTER, CRAIG
Address: 104 CHAMPLAIN DR.
City-St-Zip: DELTONA, FL 32725

Title: V () Delete
Name: SYLVESTER, ESTHER
Address: 104 CHAMPLAIN DR.
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SYLVESTER, CRAIG
Address: 183 HIBISCUS LN
City-St-Zip: DELTONA, FL 32738

Title: V (X) Change () Addition
Name: SYLVESTER, ESTHER
Address: 183 HIBISCUS LN
City-St-Zip: DELTONA, FL 32738

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: ESTHER SYLVESTER

V

10/06/2006

Electronic Signature of Signing Officer or Director

Date