2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000030687

Entity Name: COMPUTER INNOVATIONS AND SERVICES, INC.

FILED Oct 25, 2007 Secretary of State

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

10020 SHERIDAN ST # 209 17010 SW 36TH CT PEMBROKE PINES, FL 33024 MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

10020 SHERIDAN ST # 209 17010 SW 36TH CT PEMBROKE PINES, FL 33024 MIRAMAR, FL 33027

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GUEVARA, LAURA MILENA

10020 SHERIDAN ST # 209

PEMBROKE PINES, FL 33024 US

FAJARDO, JUAN J

17010 SW 36TH CT

MIRAMAR, FL 33027 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: JUAN JOSE FAJARDO 10/25/2007

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

 Name:
 GUEVARA, LAURA MILENA
 Name:
 FAJARDO, JUAN

 Address:
 10020 SHERIDAN ST # 209
 Address:
 17010 SW 36TH CT

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:
 MIRAMAR, FL 33027

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

 Name:
 FAJARDO, JUAN JOSE
 Name:

 Address:
 10020 SHERIDAN ST # 209
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JUAN JOSE FAJARDO PSD 10/25/2007