2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000054897

Entity Name: ALL PRO COMPLETE SERVICES INC.

FILED Jan 16, 2007 Secretary of State

Littly Na	me. ALL PRO CO	JIVIFEE	TE SERVICES, INC.			
Current Principal Place of Business:			ess:	New Principal Place of Business:		
	ROKEE AVENUE LM BEACH, FL 3		US			
Current Mailing Address:				New Mailing Address:		
2623 CHE WEST PA	ROKEE AVENUE LM BEACH, FL 3	: 3409	US			
FEI Number	: 71-0981598	FEI Num	ber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address	Name and Address of New Registered Agent:	
WEST PA	ROKEE AVENUE LM BEACH, FL 3	3409	US is statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE: WILLIE RIVE	ERA				
	Electronic	Signatı	re of Registered Age	ent	Date	
	nce with s. 607.193(2 mpaign Financing Tr			at receive the prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () De RIVERA, WILLIE A 2623 CHEROKEE WEST PALM BEAC	AVENUE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () De LIMA, RICHARD J 3635 E ROAD LOXAHATCHEE, F		nus	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: RACHELLIMA MNGR 01/16/2007