

2006 FOR PROFIT CORPORATION REINSTATEMENT


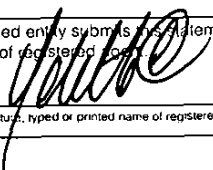

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REINSTATEMENT

0292006 REIN-P CRZE098 (11/05)

DOCUMENT # P05000063128					
1. Entity Name SEARCH AMERICA SERVICES, INC.					
Principal Place of Business 9517 NW 47 TERR MIAMI, FL 33178			Mailing Address 9517 NW 47 TERR MIAMI, FL 33178		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-2771241	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ALVAREZ, YOLETTE 9517 NW 47 TERR MIAMI, FL 33178				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 				Alvarez, Yvette	
Signature, typed or printed name of registered agent and title if applicable				10/26/2006	
				DATE	
				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS					
TITLE	D	<input type="checkbox"/> Delete			
NAME	ALVAREZ, YOLETTE				
STREET ADDRESS	9517 NW 47 TERR				
CITY-ST-ZIP	MIAMI, FL 33178				
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> Delete			
NAME					
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NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> Delete			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: 		Yvette Alvarez		10/26/2006	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	
				305-499-5003	

Q Mitchell OCT 30 2006

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Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Dear Sir or Madam at the Florida Division of Corporation,

As per our conversation on October 26, 2006 we write this letter on behalf of:

SEARCH AMERICA SERVICES, INC

MAILING ADDRESS

9517 NW 47 TERR
MIAMI, FL 33178

Document Number
P05000063128

FEI Number
202771241

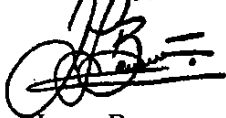
Date Filed
04/28/2005

The representative at the Division allowed us to pay the regular annual fee for this year's renewal. This corporation never received its annual report renewal card and we ask that you please waive the reinstatement fee due to non-receipt of the notice.

I am sending a check for \$150.00 this year's renewal.

Thank you very much for your understanding,

Sincerely,



Jorge Banos
Agent of the President