

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000081463

Entity Name: ABC PROFESSIONAL SERVICES, INC

FILED  
Mar 21, 2007  
Secretary of State

**Current Principal Place of Business:**

321 SW 76TH TERRACE  
NORTH LAUDERDALE, FL 33068

**New Principal Place of Business:**

6890 SW 10TH STREET  
NORTH LAUDERDALE, FL 33068

**Current Mailing Address:**

321 SW 76TH TERRACE  
NORTH LAUDERDALE, FL 33068

**New Mailing Address:**

6890 SW 10TH STREET  
NORTH LAUDERDALE, FL 33068

FEI Number: 20-2970553

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAX HOUSE CORPORATION  
1261 E SAMPLE ROAD  
POMPANO BEACH, FL 33064 US

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

EAGLE TAX REPRESENTATION, CORP  
23150 SANDALFOOT PLAZA DRIVE  
STE E  
BOCA RATON, FL 334286530 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: PAULO OLIVEIRA

03/21/2007

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:**

Title: P ( ) Delete  
Name: LEIVA, FILADELFO  
Address: 321 SW 76TH TERRACE  
City-St-Zip: NORTH LAUDERDALE, FL 33068

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LEIVA, FILADELFO  
Address: 6890 SW 10TH STREET  
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: FILADELFO LEIVA

P

03/21/2007

Electronic Signature of Signing Officer or Director

Date