

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000097979

FILED  
Feb 01, 2007  
Secretary of State

Entity Name: HIGH LEVEL PRO SERVICES CORP

## Current Principal Place of Business:

1020 CRYSTAL LAKE DRIVE  
UNIT 102  
POMPANO BEACH, FL 33064

## New Principal Place of Business:

15324 64TH PL N  
LOXAHATCHEE, FL 33470

## Current Mailing Address:

1020 CRYSTAL LAKE DRIVE  
UNIT 102  
POMPANO BEACH, FL 33064

## New Mailing Address:

15324 64TH PL  
LOXAHATCHEE, FL 33470

FEI Number: 20-3137912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASSARIOL, ERLON N  
1020 CRYSTAL LAKE DRIVE  
UNIT 102  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

MASSARIOL, ERLON N  
15324 64TH PL  
UNIT 102  
LOXAHATCHEE, FL 33470 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: ERLON MASSARION

02/01/2007

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: MASSARIOL, ERLON N  
Address: 1020 CRYSTAL LAKE DRIVE UNIT 102  
City-St-Zip: POMPAN0 BEACH, FL 33064

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MASSARIOL, ERLON N  
Address: 15324 64TH PL  
City-St-Zip: LOXAHATCHEE, FL 33470

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: ERLON MASSARIOL

P

02/01/2007

Electronic Signature of Signing Officer or Director

Date