

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000109287

FILED
Dec 06, 2006
Secretary of State

Entity Name: AMIGOS QUALITY SERVICES, INC.

Current Principal Place of Business:

2709 SWAMP CABBAGE CT., STE. 100
FT. MYERS, FL 33901

New Principal Place of Business:

1235 SE 8TH
CAPE CORAL, FL 33990 US

Current Mailing Address:

2709 SWAMP CABBAGE CT., STE. 100
FT. MYERS, FL 33901

New Mailing Address:

1235 SE 8TH
CAPE CORAL, FL 33990

FEI Number: 20-3265714

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 RD.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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: TAX HOUSE CORPORATION

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: DP () Delete
Name: RIBEIRO DOS SANTOS, ODERCI
Address: 2709 SWAMP CABBAGE CT., STE. 100
City-St-Zip: FT. MYERS, FL 33901

Title: DV (X) Delete
Name: GUIMARAES DOS REIS, JOSE
Address: 2709 SWAMP CABBAGE CT., STE. 100
City-St-Zip: FT. MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: NASCIMENTO, VALDIR D DP
Address: 1235 SE 8TH
City-St-Zip: CAPE CORAL, FL 33990 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VALDIR DA COSTA NASCIMENTO

DP

12/06/2006

Electronic Signature of Signing Officer or Director

Date