# 2007 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**
**Mar 01, 2007**
**Secretary of State**

DOCUMENT# P05000112079

**Entity Name:** DIVERSIFIED PROFESSIONAL SOLUTIONS INC.

**Current Principal Place of Business:**

1717 N. BAYSHORE DR., SUITE 2452
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

1717 N. BAYSHORE DR., SUITE 2452
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

FIROUZ, ALLEN
1717 N. BAYSHORE DR., SUITE 2452
MIAMI, FL 33132 US

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

FIROUZ, ALLEN
1250 SOUTH MIAMI AVE
1814
MIAMI, FL 33130 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: ALLEN FIROUZ 03/01/2007
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: PSD ( ) Delete
Name: FIROUZ, ALLEN
Address: 1717 N. BAYSHORE DR., SUITE 2452
City-St-Zip: MIAMI, FL 33132

Title: VTD ( ) Delete
Name: FIROUZ, AARON
Address: 1717 N. BAYSHORE DR., SUITE 2452
City-St-Zip: MIAMI, FL 33132

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

Title: PSD (X) Change ( ) Addition
Name: FIROUZ, ALLEN
Address: 1250 S. MIAMI AVE #1814
City-St-Zip: MIAMI, FL 33130

Title: VTD (X) Change ( ) Addition
Name: FIROUZ, AARON
Address: 1250 S. MIAMI AVE #1814
City-St-Zip: MIAMI, FL 33130

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: ALLEN FIROUZ PSD 03/01/2007
Electronic Signature of Signing Officer or Director Date