

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000112590

FILED
Feb 02, 2007
Secretary of State

Entity Name: PARZAN BUSINESS SERVICES, INC.

Current Principal Place of Business:

6342 NW 501 TERR
MIAMI LAKES, FL 33015

New Principal Place of Business:

6342 NW 201 TERR
MIAMI LAKES, FL 33015

Current Mailing Address:

6342 NW 501 TERR
MIAMI LAKES, FL 33015

New Mailing Address:

6342 NW 201 TERR
MIAMI LAKES, FL 33015

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARET, MARTHA S
6342 NW 501 TERR
MIAMI LAKES, FL 33015 US

Name and Address of New Registered Agent:

PARET, MARTHA S
6342 NW 201 TERR
MIAMI LAKES, FL 33015 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: PARET, MARTHA S

02/02/2007

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: PARET, MARTHA S
Address: 6342 NW 501 TERR
City-St-Zip: MIAMI LAKES, FL 33015

Title: VP () Delete
Name: PARET, WILFREDO
Address: 6342 NW 501 TERR
City-St-Zip: MIAMI LAKES, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARET, MARTHA S
Address: 6342 NW 201 TERR
City-St-Zip: MIAMI LAKES, FL 33015

Title: VP (X) Change () Addition
Name: PARET, WILFREDO
Address: 6342 NW 201 TERR
City-St-Zip: MIAMI LAKES, FL 33015

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: PARET, MARTHA S

P

02/02/2007

Electronic Signature of Signing Officer or Director

Date