

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000133681

FILED
Oct 09, 2007
Secretary of State

Entity Name: ACCREDITED COMEDY TRAFFIC SCHOOL, INC.

Current Principal Place of Business:

4188 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4190 SOUTH UNIVERSITY DRIVE
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-3542277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMAREL, ROBERT
12991 BLUE LAKE DRIVE
WELLINGTON, FL 33414 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: ROBERT SAMAREL

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,D () Delete
Name: GIL, SHIRLEY
Address: 4909 NW 92 AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: VP,D () Delete
Name: KIRBY, DONNA
Address: 1125 YALE DRIVE
City-St-Zip: HOLLYWOOD, FL 33091

Title: S,D () Delete
Name: SAMAREL, ROBERT
Address: 12991 BLUE LAKE DRIVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ROBERT SAMAREL

S,D

10/09/2007

Electronic Signature of Signing Officer or Director

Date