2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000153074

Entity Name: BANNIS SERVICES, INC.

FILED Feb 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6111 NORTHWEST 16TH PLACE SUNRISE, FL 33313 **Current Mailing Address: New Mailing Address:** 6111 NORTHWEST 16TH PLACE SUNRISE, FL 33313 FEI Number: 87-0757218 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BANNISVICTOR, URSULINE L MS. 6111 NORTHWÉST 16TH PLACE SUNRISE, FL 33313 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: URSULINE L. BANNISVICTOR 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BANNISVICTOR, URSULINE LOWNER Name: Name: 6111 NORTHWEST 16TH PLACE Address: Address: City-St-Zip: SUNRISE, FL 33313 City-St-Zip: Title: () Delete Title: () Change (X) Addition BANNISVICTOR, URSULINE L OWNER Name: Name: 6111 NW 16TH PLACE Address: Address: SUNRISE, FL 33313 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition BANNISVICTOR, URSULINE L Name: Name: 6111 NW 16TH PLACE Address Address: City-St-Zip: City-St-Zip: SUNRISE, FL 33313 Title: () Delete Title: () Change (X) Addition BANNISVICTOR, URSULINE L Name: Name: Address: Address: 6111 NW 16TH PLACE City-St-Zip: City-St-Zip: SUNRISE, FL 33313 Title: Title: () Change (X) Addition () Delete BANNISVICTOR, URSULINE L Name: Name: Address: Address: 6111 NW 16TH PLACE City-St-Zip: City-St-Zip: SUNRISE, FL 33313 Title: () Delete Title: () Change (X) Addition BANNISVICTOR, URSULINE L Name: Name: 6111 NW 16TH PLACE Address: Address: City-St-Zip: City-St-Zip: SUNRISE, FL 33313

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: URSULINE L. BANNISVICTOR MS 02/20/2008