## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000155807

Entity Name: A & C MEDICAL SERVICES, INC.

FILED Sep 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 14851 SW 9TH LANE
 14852 SW 34 LANE

 MIAMI, FL 33194 US
 MIAMI, FL 33185 US

Current Mailing Address: New Mailing Address:

14851 SW 9TH LANE 14852 SW 34 LANE MIAMI, FL 33194 US MIAMI, FL 33185 US

FEI Number: 20-3851671 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BASILIO, JOSE D 1414 NW 107TH AVENUE SUITE #206 MIAMI, FL 33172 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: JOSE D. BASILIO

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:
 CONCEPCION, ALBERTO R

 Address:
 14851 SW 9TH LANE

 City-St-Zip:
 MIAMI, FL 33194 US

 Title:
 VP
 ( ) Delete

 Name:
 CONCEPCION, DAMARYS R

 Address:
 14851 SW 9TH LANE

 City-St-Zip:
 MIAMI, FL 33194 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONCEPCION, ALBERTO R
Address: 14852 SW 34 LANE
City-St-Zip: MIAMI, FL 33185 US

Title: VP (X) Change () Addition
Name: CONCEPCION, DAMARYS R
Address: 14852 SW 34 LANE
City-St-Zip: MIAMI, FL 33185 US

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: ALBERTO R. CONCEPCION P 09/17/2007