2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 21, 2007
Secretary of State

DOCUMENT# P05000167027

Entity Name: CAPITAL CONSULTING SERVICES, INC.

Current Principal Place of Business:

1490 NW 104 AVE
PLANTATION, FL 33322 US

New Principal Place of Business:

Current Mailing Address:

1490 NW 104 AVE
PLANTATION, FL 33322 US

New Mailing Address:

FEI Number: 20-3998944 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CAMP, RICHARD CPA
6817 SOUTHPOINT PKWY
2201
JACKSONVILLE, FL 32216 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: RICHARD CAMP

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: D ( ) Delete
Name: COHEN, MICHAEL
Address: 1490 NW 104 AVE
City-St-Zip: PLANTATION, FL 33322 US

Title: VPTS ( ) Delete
Name: MOORE, JAMES A
Address: 1490 NW 104 AVE
City-St-Zip: PLANTATION, FL 33322 US

Title: P (X) Delete
Name: GUCKAVAN, BRIAN
Address: 1490 NW 104 AVE
City-St-Zip: PLANTATION, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition
Name: MOORE, JAMES
Address: 1490 NW 104 AVE
City-St-Zip: PLANTATION, FL 33322 US

Title: D (X) Change ( ) Addition
Name: GUCKAVAN, BRYAN
Address: 1490 NW 104 AVE
City-St-Zip: PLANTATION, FL 33322 US

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: JAMES MOORE PST 09/21/2007

Electronic Signature of Signing Officer or Director — Date