2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 23, 2008
Secretary of State

DOCUMENT# P06000051064

Entity Name: A/C ADVICE OF SOUTH FLORIDA INC.

Current Principal Place of Business:

1780 PALM COVE BLVD, BAY 204
DELRAY BEACH, FL 33445

New Principal Place of Business:

7189 CHESAPEAKE CIRCLE
BOYNTON BEACH, FL 33436 US

Current Mailing Address:

1780 PALM COVE BLVD, BAY 204
DELRAY BEACH, FL 33445

New Mailing Address:

7189 CHESAPEAKE CIRCLE
BOYNTON BEACH, FL 33436 US

FEI Number: 20-4688007 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FARINACCI, GLENN R
1730 S.FEDERAL HWY
#208
DELRAY BEACH, FL 33483 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: GLENN R FARINACCI
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: KYLE, COREY
Address: 1780 PALM COVE BLVD, BAY 204
City-St-Zip: DELRAY BEACH, FL 33445

Title: VP ( ) Delete
Name: AHMED, AMIRA
Address: 1780 PALM COVE BLVD, BAY 204
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KYLE, COREY
Address: 7189 CHESAPEAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: S (X) Change ( ) Addition
Name: KYLE, NORA
Address: 7189 CHESAPEAKE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33446 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: COREY KYLE P 07/23/2008
Electronic Signature of Signing Officer or Director Date