## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000054040

Entity Name: JE PROCESSING AND CONSULTING, INC.

FILED Feb 07, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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7684 NW 96TH TERRACE TAMARAC, FL 33321 US

Current Mailing Address: New Mailing Address:

7684 NW 96TH TERRACE 2925 NW 126 AVE TAMARAC, FL 33321 US 1-305 SUNRISE, FL 33323

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

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

FERNANDEZ, MELISSA
7684 NW 96TH TERRACE
TAMARAC, FL 33321 US
ESTEVEZ, MELISSA
7684 NW 96TH TERRACE
TAMARAC, FL 33321 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: MELISSA ESTEVEZ 02/07/2008

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: PSTD ( ) Delete Title: (X) Change ( ) Addition FERNANDEZ, MELISSA Name: Name: ESTEVEZ, MELISSA 7684 NW 96TH TERRACE 7684 NW 96TH TERRACE Address: Address: City-St-Zip: TAMARAC, FL 33321 US City-St-Zip: TAMARAC, FL 33321 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition

 Name:
 ESTEVEZ, JOSE
 Name:

 Address:
 7684 NW 96TH TERRACE
 Address:

 City-St-Zip:
 TAMARAC, FL 33321 US
 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: MELISSA ESTEVEZ PSTD 02/07/2008