

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000056111

FILED
Jul 10, 2009
Secretary of State

Entity Name: IAN PROFESSIONAL SERVICES, INC.

Current Principal Place of Business:

3441 NE 5TH AVE, SUITE B
POMPANO BEACH, FL 33064

New Principal Place of Business:

Current Mailing Address:

3441 NE 5TH AVE, SUITE B
POMPANO BEACH, FL 33064

New Mailing Address:

FEI Number: 84-1708808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEVES, IDEMAR L
671 CYPRESS LAKE BLVD
C
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

NEVES, IDEMAR L
3441 NE 5TH AVE, SUITE B
POMPANO BEACH, FL 33064 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: IDEMAR L. NEVES

07/10/2009

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: PVTs () Delete
Name: NEVES, IDEMAR L
Address: 671 CYPRESS LAKE BLVD APT C
City-St-Zip: POMPANO BEACH, FL 33064

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: NEVES, IDEMAR L
Address: 3441 NE 5TH AVE, SUITE B
City-St-Zip: POMPANO BEACH, FL 33064

Title: VS () Change (X) Addition
Name: ALISSON CARLOS, DA COSTA BIGAS
Address: 3441 NE 5TH AVE, SUITE B
City-St-Zip: POMPANO BEACH, FL 33064

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: IDEMAR L. NEVES

PT

07/10/2009

Electronic Signature of Signing Officer or Director

Date