## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000079775

Entity Name: VERSATILE GROUP SERVICES, INC

2620 DALMATION LANE E

JACKSONVILLE, FL 32246

Address:

City-St-Zip:

FILED Dec 26, 2007 Secretary of State

Entity Nai	me: VERSATILI	E GROUP SERVICES, INC.			
Current Principal Place of Business:			New Principal Place of E	New Principal Place of Business:	
	MATION LANE E VILLE, FL 3224		729 DEWBERRY DR JACKSONVILLE, FL 3225	59 US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	MATION LANE E VILLE, FL 3224		729 DEWBERRY DR JACKSONVILLE, FL 3225	59 US	
FEI Number:	: 20-5031669	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Cu	rrent Registered Agent:	Name and Address of Ne	Name and Address of New Registered Agent:	
121 KISSIMME The above in the State	e of Florida.	6 bmits this statement for the	purpose of changing its registered off	ice or registered agent, or both,	
SIGNATU	RE: JOSE JARI	DIM JUNIOR Signature of Registered A	gent	 Date	
	ce with s. 607.193(	2)(b), F.S., the corporation did r		24.0	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES 1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () C LUCAS, JASON 2620 DALMATION JACKSONVILLE,		Title: ( ) 0 Name: Address: City-St-Zip:	Change ()Addition	
Title: Name: Address: City-St-Zip:	VP () C SCHMIDT, LAWR 2620 DALMATION JACKSONVILLE,	I LANE E	Title: ( ) 0 Name: Address: City-St-Zip:	Change()Addition	
Title: Name:	S ()D	elete	Title: ( ) 0 Name:	Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: LAWRENCE SCHMIDT VP 12/26/2007