

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000085927

Entity Name: AT GENERAL SERVICES INC

FILED
Apr 21, 2009
Secretary of State

Current Principal Place of Business:

4749 NW 9TH AVE
POMPANO BCH, FL 33064

Current Mailing Address:

4749 NW 9TH AVE
POMPANO BCH, FL 33064

New Principal Place of Business:

4363 SW 10TH PLACE
SUITE 205
DEERFIELD BEACH, FL 33442

New Mailing Address:

4363 SW 10TH PLACE
SUITE 205
DEERFIELD BEACH, FL 33064

FEI Number: 20-5116560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD
POMPANO BCH, FL 33064 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1100 S FEDERAL HWY
SECOND FLOOR
DEERFIELD BEACH, FL 33441 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: BRENO R GOMES - PRESIDENT

04/21/2009

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: DP () Delete
Name: VILAR, CLEBERSON N
Address: 4749 NW 9TH AVE
City-St-Zip: POMPANO BCH, FL 33064

Title: VP () Delete
Name: DA SILVA, FABIANO L
Address: 4749 NW 9TH AVE
City-St-Zip: POMPANO BCH, FL 33064

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: VILAR, CLEBERSON N
Address: 4363 SW 10TH PLACE, #205
City-St-Zip: DERFIELD BEACH, FL 33442

Title: VPD (X) Change () Addition
Name: DA SILVA, FABIANO L
Address: 4363 SW 10TH PLACE, #205
City-St-Zip: DERFIELD BEACH, FL 33442

Title: D () Change (X) Addition
Name: SOARES, ROBERTO F
Address: 326 FARMAN, P, #326
City-St-Zip: DEERFIELD BEACH, FL 33442

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: CLEBERSON N VILAR

D

04/21/2009

Electronic Signature of Signing Officer or Director

Date