

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000094035

FILED
Feb 29, 2008
Secretary of State

Entity Name: R.G. & ASSOCIATES CONSULTING SERVICES, INC.

Current Principal Place of Business:

4841 POSEIDON PLACE
LAKE WORTH, FL 33463 US

New Principal Place of Business:

Current Mailing Address:

4841 POSEIDON PLACE
LAKE WORTH, FL 33463 US

New Mailing Address:

FEI Number: 20-5217091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIL, ROY
4841 POSEIDON PLACE
LAKE WORTH, FL 33463 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: ROY GIL

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: GIL, ROY
Address: 4841 POSEIDON PLACE
City-St-Zip: LAKE WORTH, FL 33463 US

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GIL, ROY P
Address: 4841 POSEIDON PLACE
City-St-Zip: LAKE WORTH, FL 33463 US

Title: VP () Change (X) Addition
Name: DIAZ, CORINNE V P
Address: 4841 POSEIDON PLACE
City-St-Zip: LAKE WORTH, FL 33463 US

Title: T,S () Change (X) Addition
Name: GIL, NORA T,S
Address: 4841 POSEIDON PLACE
City-St-Zip: LAKE WORTH, FL 33463 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: ROY GIL

Electronic Signature of Signing Officer or Director

P

02/29/2008

Date