

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000123905

FILED
Oct 27, 2008
Secretary of State

Entity Name: C.A.P.S. CODE ASSISTANCE & PERMIT SOLUTIONS INC.

Current Principal Place of Business:

253 172 STREET
UNIT #110
SUNNY ISLES BEACH, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

253 172 STREET
UNIT #110
SUNNY ISLES BEACH, FL 33160 US

New Mailing Address:

FEI Number: 56-2652348

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JULIO, DAVILA E
253 172 STREET
UNIT #110
SUNNY ISLES BEACH, FL 33160 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: JULIO E DAVILA

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: D () Delete
Name: DAVILA, JULIO E
Address: 253 172 ST 3110 DR
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: JULIO E DAVILA

D

10/27/2008

Electronic Signature of Signing Officer or Director

Date