## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000136375

Address:

City-St-Zip:

Entity Name: EAST HIALEAH SECURITY CONSULTANTS-ASC, INC.

FILED Oct 18, 2007 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
330 EAST ! 104 HIALEAH, I	9TH STREET					
Current Mailing Address:			New Mailir	ng Address:		
	_	•	rew mann	ng Addiess.		
330 EAST 9 104 HIALEAH, I	9TH STREET FL 33010					
FEI Number:	42-1715479	FEI Number Applied For ( )	FEI Number Not Appli	licable ( ) Certificate of Status Desired ( )		
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Registered Agent:		
104 HIALEAH, I	9TH STREET FLORIDA, FL 3		oose of changing it	ts registered office or registered agent, or both,		
in the State		abilitis tille statement for the purp	oose of changing it	to registered office of registered agent, or both,		
SIGNATUR	RE: MILDRED					
	Electronic	c Signature of Registered Agent		Date		
		(2)(b), F.S., the corporation did not re Trust Fund Contribution (  ).	eceive the prior notice	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VP () [ PICADO, ANA B 330 EAST 9TH S HIALEAH, FL 33		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition DAVILA, DAMARIS G 330 EAST 9TH STREET #104 HIALEAH, FL 33010		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	VP ( ) Change (X) Addition PINEDA, EVELING J 330 EAST 9TH STREET #104 STREET HIALEAH, FL 33010		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	M () Change (X) Addition MARTINIZ, JAMILET 330 EAST 9TH STREET # 104 HIALEAH,, FL 33010		
Title: Name:	1()	Delete	Title: Name:	D ( ) Change (X) Addition LOPEZ, MILDRED A		

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:

330 EAST 9TH STREET #104

City-St-Zip: HIALEAH, FL 33010

SIGNATURE: MILDRED A. LOPEZ D 10/18/2007