# 2008 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**
**Oct 03, 2008**
**Secretary of State**

DOCUMENT# P07000101448

**Entity Name:** OHANA PROFESSIONAL SERVICES, CORP

**Current Principal Place of Business:**

310 ROCKLAND DR
FORT PIERCE, FL 34947 US

**New Principal Place of Business:**

907 S 27TH ST
4-207
FORT PIERCE, FL 34947 US

**Current Mailing Address:**

310 ROCKLAND DR
FORT PIERCE, FL 34947 US

**New Mailing Address:**

907 S 27TH ST
4-207
FORT PIERCE, FL 34947 US

**FEI Number: 26-0898767** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SILVA, ANTONIO L
310 ROCKLAND DR
FORT PIERCE, FL 34947 US

**Name and Address of New Registered Agent:**

SILVA, ANTONIO L
907 S 27TH ST
4-207
FORT PIERCE, FL 34947 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: ANTONIO L. SILVA 10/03/2008
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/D ( ) Delete
Name: SILVA, ANTONIO L
Address: 310 ROCKLAND DR
City-St-Zip: FORT PIERCE, FL 34947 US

Title: VP/D (X) Delete
Name: ABILA, SULLY
Address: 310 ROCKLAND DR
City-St-Zip: FORT PIERCE, FL 34947 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: SILVA, ANTONIO L
Address: 907 S 27TH ST, SUITE 4-207
City-St-Zip: FORT PIERCE, FL 34947 US

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: ANTONIO L. SILVA PD 10/03/2008
Electronic Signature of Signing Officer or Director Date