## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000107043

Entity Name: ABREU & ASSOCIATES CONSULTING INC

FILED Oct 05, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

12555 NW 54TH CT 10541 NW 56TH PL

CORAL SPRINGS, FL 33076 CORAL SPRINGS, FL 33076

**Current Mailing Address: New Mailing Address:** 

12555 NW 54TH CT 10541 NW 56TH PL

CORAL SPRINGS, FL 33076 CORAL SPRINGS, FL 33076

FEI Number: 26-1139338 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CSG - CAPITAL SERVICES GROUP INC 446 W HILLSBORO BLVD 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: MARCOS REZENDE

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: PDS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete (X) Change ( ) Addition ABREU, PAULO CESAR ABREU, PAULO CESAR Name: Name: 12555 NW 54TH CT 10541 NW 56TH PL Address: Address:

City-St-Zip: CORAL SPRINGS, FL 33076 City-St-Zip: CORAL SPRINGS, FL 33076

Title: **VPDT** (X) Delete Title: () Change () Addition

Name: REZENDE, MARCOS A Name: 21667 ALTAMIRA AVE Address: Address: BOCA RATON, FL 33433 City-St-Zip: 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: PAULO CESAR ABREU **PDS** 10/05/2009