

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000051942

FILED
Oct 13, 2009
Secretary of State

Entity Name: ASSIS GENERAL SERVICES, CORP.

Current Principal Place of Business:

18892 LA COSTA LANE
BOCA RATON, FL 33496

New Principal Place of Business:

3590 BLUE LAKE DRIVE
UNIT 304
POMPANO BEACH, FL 33064

Current Mailing Address:

18892 LA COSTA LANE
BOCA RATON, FL 33496

New Mailing Address:

3590 BLUE LAKE DRIVE
UNIT 304
POMPANO BEACH, FL 33064

FEI Number: 90-0435192

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSIS, WESLEY S
18892 LA COSTA LANE
BOCA RATON, FL 33496 US

Name and Address of New Registered Agent:

ASSIS, WESLEY S
3590 BLUE LAKE DRIVE
UNIT 304
POMPANO BEACH, FL 33064 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: WESLEY S. ASSIS

10/13/2009

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: PD () Delete
Name: ASSIS, WESLEY S
Address: 18892 LA COSTA LANE
City-St-Zip: BOCA RATON, FL 33496

Title: D () Delete
Name: ROSA, ISAIAS S
Address: 18892 LA COSTA LANE
City-St-Zip: BOCA RATON, FL 33496

Title: D (X) Delete
Name: DA SILVA, AUGUSTO
Address: 3590 BLUE LAKE DR APT 304
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ASSIS, WESLEY S
Address: 3590 BLUE LAKE DRIVE, UNIT 304
City-St-Zip: POMPANO BEACH, FL 33064

Title: D (X) Change () Addition
Name: ROSA, ISAIAS S
Address: 3590 BLUE LAKE DRIVE, UNIT 304
City-St-Zip: POMPANO BEACH, FL 33064

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: WESLEY S. ASSIS

PD

10/13/2009

Electronic Signature of Signing Officer or Director

Date