

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P94000060276

Entity Name: AMBASSADOR SERVICES INC.

FILED
Oct 18, 2005
Secretary of State

Current Principal Place of Business:

P.O. BOX 632
245 CHALLENGER ROAD
CAPE CANAVERAL, FL 32920

Current Mailing Address:

P.O. BOX 632
245 CHALLENGER ROAD
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

P.O. BOX 654
245 CHALLENGER ROAD
CAPE CANAVERAL, FL 32920

New Mailing Address:

P.O. BOX 654
245 CHALLENGER ROAD
CAPE CANAVERAL, FL 32920

FEI Number: 59-3261658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMELIN, GEORGE CPA
45 MCLEOD ST. STE 3
MERRITT ISLAND, FL 32953 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: GEORGE HAMELIN

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: PS () Delete
Name: HUBERT, BRIAN A
Address: 245 CHALLENGER RD.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VT () Delete
Name: GARVER, DONALD H
Address: 245 CHALLENGER RD.
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GARVER, DONALD H
Address: 245 CHALLENGER RD.
City-St-Zip: CAPE CANAVERAL, FL 32920

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN A HUBERT

PRES

10/18/2005

Electronic Signature of Signing Officer or Director

Date