

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000032086

FILED
Feb 01, 2005
Secretary of State

Entity Name: EQUITA FINANCIAL AND INSURANCE SERVICES, INC.

Current Principal Place of Business:

1851 NORTHWEST 125TH ST
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

1851 NORTHWEST 125TH ST
SUITE 220
PEMBROKE PINES, FL 33028 US

Current Mailing Address:

1851 NORTHWEST 125TH ST
PEMBROKE PINES, FL 33028 US

New Mailing Address:

3755 CAPITAL OF TX HWY SOUTH
SUITE 148
AUSTIN, TX 78704 US

FEI Number: 65-0744091

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: CORPORATION SERVICE COMPANY

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: D () Delete
Name: WOLFE, RICHARD G
Address: 11551 FOREST CENTRAL DR., FOREST CENTRAL II
City-St-Zip: DALLAS, TX 75243

Title: D () Delete
Name: MYER, ROBERT L
Address: 3755 CAPITAL OF TEXAS HWY SO, SUITE 148
City-St-Zip: AUSTIN, TX 78704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RICHARD G WOLFE

D

02/01/2005

Electronic Signature of Signing Officer or Director

Date