## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P97000069417

BROOKS, BUNNY

MIAMI, FL 33157

15930 SW 105 AVENUE

Name:

Address:

City-St-Zip:

FILED Apr 19, 2009 Secretary of State

Entity Nar	ne: FEDB CC	MPUTER SERVICES, INC.			
Current Principal Place of Business:			New Principal F	New Principal Place of Business:	
15930 SW MIAMI, FL	105 AVENUE 33157				
Current Mailing Address:			New Mailing Address:		
15930 SW MIAMI, FL	105 AVENUE 33157				
FEI Number:	65-0771586	FEI Number Applied For ( )	FEI Number Not Applicable	( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addi	Name and Address of New Registered Agent:	
KILDARE, EVERETT B 19526 SW 25TH COURT MIRAMAR, FL 33029 US			15930 SW 105 A	BUNNY, BROOKS 15930 SW 105 AVENUE MIAMI, FL 33157 US	
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing its reg	istered office or registered agent, or both,	
SIGNATURE: BUNNY BROOKS				04/19/2009	
	Electron	ic Signature of Registered Age	nt	Date	
		8(2)(b), F.S., the corporation did not Trust Fund Contribution ( ).	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BROOKS, DEVO 16115 SW 1071 MIAMI, FL 3315	TH AVENUE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	JACQUETTE, F	AVENUE, UNIT 704	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () KILDARE, EVER 19526 SW 25TH MIRAMAR, FL	I COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title:	S ()	Delete	Title:	( ) Change ( ) Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BUNNY BROOKS S 04/19/2009