

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000057955

Entity Name: SERVICE ONE JANITORIAL, INC.

FILED
Dec 13, 2006
Secretary of State

Current Principal Place of Business:

2267 NW 77 TERRACE
PEMBROKE PINES, FL 33024

Current Mailing Address:

2267 NW 77 TERRACE
PEMBROKE PINES, FL 33024

New Principal Place of Business:

11745 W. ATLANTIC BLVD.
01
CORAL SPRINGS, FL 33071

New Mailing Address:

11745 W. ATLANTIC BLVD.
01
CORAL SPRINGS, FL 33071

FEI Number: 65-0720868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AFFORDABLE ACCOUNTING SERVICES OF SOUTH FL
2267 NW 77 TERRACE
PEMBROKE PINES, FL 33024 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: AFFORDABLE ACCOUNTING SERVICES OF SOUTH FL

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: NUNES, THALES
Address: 2267 NW 77 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33024

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NUNES, THALES
Address: 11745 W. ATLANTIC BLVD. # 01
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP () Change (X) Addition
Name: NUNES, TRACY GRIMSHAW
Address: 11745 W. ATLANTIC BLVD # 01
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the 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: THALES NUNES

PD

12/13/2006

Electronic Signature of Signing Officer or Director

Date