2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000083442

City-St-Zip:

PLANT CITY, FL 33567 HI

Entity Name: CARLOS FLORES SERVICES, INC.

FILED Nov 05, 2009 Secretary of State

Littly Nai	IIIe. CARLO	JOT LORES SERVICES, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
2801 LITTI VALRICO,	LE RD FL 33594	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2801 LITTI VALRICO,	LE RD FL 33594	US			
FEI Number:	: 59-3645202	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address o	f Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	FRED RSONS AVE N, FL 33511				
The above in the State	named entit e of Florida.	y submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE: CARLO	OS FLORES			
Electronic Signature of Registered Agent			ent	Date	
		193(2)(b), F.S., the corporation did n ing Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	O FLORES, CA 2801 LITTLE VALRICO, FI	RD	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	URQUILLA, I 5914 HWY 9	() Delete MAURICIO A VICE PR 12 LOT26 FL 33567 HI	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:		() Delete TITO A SECRETA 12 LOT 26	Title: (Name: Address:) 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.

City-St-Zip:

SIGNATURE: CARLOS FLORES 0 11/05/2009