

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K42614

**FILED**  
**Oct 06, 2005**  
**Secretary of State**

**Entity Name:** BEACON TITLE SERVICES, INC.

**Current Principal Place of Business:**

6800 WEST COMMERCIAL BLVD., #1  
LAUDERHILL, FL 33319

**New Principal Place of Business:**

6209 WEST COMMERCIAL BLVD., #1  
TAMARAC, FL 33319

**Current Mailing Address:**

6800 WEST COMMERCIAL BLVD., #1  
LAUDERHILL, FL 33319

**New Mailing Address:**

6209 WEST COMMERCIAL BLVD., #1  
TAMARAC, FL 33319

FEI Number: 65-0082514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOFFMAN, DESIREE D  
6800 W. COMMERCIAL BLVD, #1  
LAUDERHILL, FL 33319 US

**Name and Address of New Registered Agent:**

HOFFMAN, DESIREE D  
6209 W. COMMERCIAL BLVD, #1  
TAMARAC, FL 33319 US

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: DESIREE D. HOFFMAN

10/06/2005

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: PVST ( ) Delete  
Name: HOFFMAN, DESIREE D  
Address: 6800 W. COMMERCIAL BLVD., #1  
City-St-Zip: FORT LAUDERDALE, FL 33319

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVST (X) Change ( ) Addition  
Name: HOFFMAN, DESIREE D  
Address: 6209 WEST COMMERCIAL BLVD., #1  
City-St-Zip: TAMARAC, FL 33319

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: DESIREE D. HOFFMAN

PVST

10/06/2005

Electronic Signature of Signing Officer or Director

Date