

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N09000000267

**FILED**  
**Aug 12, 2013**  
**Secretary of State**

**Entity Name:** BREAKTHROUGH MULTI SERVICES INC.

**Current Principal Place of Business:**

4311 22ND AVE SW #74  
NAPLES, FL 34116

**New Principal Place of Business:**

6330 SARAH LANE  
NEWPORT RICHEY, FL 34653 UN

**Current Mailing Address:**

4311 22ND AVE SW #74  
NAPLES, FL 34116

**New Mailing Address:**

6330 SARAH LANE  
NEW PORT RICHEY, FL 34163 UN

**FEI Number:** 26-4023648

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

DESRONETTE-TELCY, MARIE  
6330 SARAH LANE  
NEW PORT RICHEY, FL 34653 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:** MARIE DESRONETTE-TELCY

08/12/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** DESRONETTE-TELCY, MARIE  
**Address:** 6330 SARAH LANE  
**City-St-Zip:** NEW PORT RICHEY, FL 34653 UN

**Title:** VP  
**Name:** ROWLAND, SHIRLEY  
**Address:** 180 OAK DR  
**City-St-Zip:** ATLANTA, GA 30354

**Title:** S  
**Name:** DERONETTE, CASIMIR  
**Address:** 2111 ALBEMARLE RD APT 5D  
**City-St-Zip:** BROOKLYN, NY 11226

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** MARIE DESRONETTE-TELCY

P

08/12/2013

Electronic Signature of Signing Officer or Director

Date