

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000026354

**FILED**  
**Sep 21, 2007**  
**Secretary of State**

**Entity Name:** NATIONWIDE RELOCATION SERVICES INC

**Current Principal Place of Business:**

3245 POWERLINE RD  
SUITE 202  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

6245 POWERLINE RD  
SUITE 202  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

3245 POWERLINE RD  
SUITE 202  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

6245 POWERLINE RD  
SUITE 202  
FORT LAUDERDALE, FL 33309

**FEI Number:** 65-0990215

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DI SORBO, ALDO L JR  
1700 NW 64TH STREET  
SUITE 400  
FORT LAUDERDALE, FL 33309 US

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

DI SORBO, ALDO L JR  
6245 POWERLINE ROAD  
SUITE 202  
FORT LAUDERDALE, FL 33309 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: ALDO L DI SORBO

09/21/2007

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: DI SORBO, ALDO L JR  
Address: 6245 POWERLINE RD SUITE 202  
City-St-Zip: FORT LAUDERDALE, FL 33309

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: ALDO L DI SORBO

PRES

09/21/2007

Electronic Signature of Signing Officer or Director

Date