

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P01000066477

**Entity Name:** PSN CONSULTANTS INC.

**FILED**  
**Mar 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

11503 SOUTHERN BLVD  
ROYAL PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

11503 SOUTHERN BLVD  
ROYAL PALM BEACH, FL 33411

**New Mailing Address:**

**FEI Number:** 65-1118003

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NIFAKOS, PETER  
245 SANTA LUCIA DR  
WEST PALM BEACH, FL 33405 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:** PETER NIFAKOS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** NIFAKOS, PETER  
**Address:** 245 SANTA LUCIA DR  
**City-St-Zip:** W PALM BEACH, FL 33405

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

**SIGNATURE:** PETER NIFAKOS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

03/23/2011

\_\_\_\_\_  
Date