

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000043187

Entity Name: COMMERSERVICE, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

6690 W 26 COURT  
NO 21  
HIALEAH, FL 33016

## New Principal Place of Business:

105 PARKVIEW RD  
SEBRING, FL 33870

## Current Mailing Address:

6690 W 26 COURT  
NO 21  
HIALEAH, FL 33016

## New Mailing Address:

105 PARKVIEW RD  
SEBRING, FL 33870

FEI Number: 76-0735890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MORENO, MARIA A  
4277 SW 153 PL  
MIAMI, FL 33185 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: MARIA MORENO

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: P ( ) Delete  
Name: SUAREZ, FABIO  
Address: 6690 W 26 COURT BLG 16-21  
City-St-Zip: HIALEAH, FL 33016

Title: TS ( ) Delete  
Name: HOYOS, CATALINA  
Address: 6690 W 26 COURT BLG 16-21  
City-St-Zip: HIALEAH, FL 33016

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SUAREZ, FABIO  
Address: 105 PARKVIEW RD  
City-St-Zip: SEBRING, FL 33870

Title: TS (X) Change ( ) Addition  
Name: HOYOS, CATALINA  
Address: 105 PARKVIEW RD  
City-St-Zip: SEBRING, FL 33870

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: FABIO SUAREZ

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date