

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000071005

FILED
Jan 30, 2008
Secretary of State

Entity Name: CREDIT SOLUTIONS IN AMERICA, INC.

Current Principal Place of Business:

934 N. UNIVERSITY DRIVE, PMB 425
CORAL SPRINGS, FL 33071

New Principal Place of Business:

200 S. ANDREWS AVE.
7TH FLOOR
FORT LAUDERDALE, FL 33301

Current Mailing Address:

934 N. UNIVERSITY DRIVE, PMB 425
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 20-1115925 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

POWELL, BETHOYIA K
934 N. UNIVERSITY DRIVE, PMB 425
CORAL SPRINGS, FL 33071 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: BETHOYIA K POWELL

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: DV () Delete
Name: POWELL, BETHOYIA K
Address: 934 N. UNIVERSITY DRIVE, PMB 425
City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POWELL, BETHOYIA K
Address: 934 N. UNIVERSITY DRIVE, PMB 425
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP () Change (X) Addition
Name: WEDDERBURN, MICHAEL
Address: 1780 HARBOR POINT CIRCLE
City-St-Zip: WESTON, FL 33327

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: BETHOYIA K POWELL

Electronic Signature of Signing Officer or Director

P

01/30/2008

Date