2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000140149

Entity Name: TORRES CONSULTANT SERVICES, INC.

FILED Nov 15, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

14315 S.W. 180 TERRACE SOUTH MIAMI, FL 33177 US

Current Mailing Address: New Mailing Address:

14315 S.W. 180 TERRACE SOUTH MIAMI, FL 33177 US

FEI Number: 20-1725737 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TORRES, GLORIA

14315 S.W. 180 TERR.

SOUTH MIAMI, FL 33177 US

A1A REGISTERED AGENT INC
92 SADBERRY RD.
QUINCY, FL 32351 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: PAUL SMITH V.P 11/15/2005

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: PT (X) Change () Addition

 Name:
 TORRES, ERASMO
 Name:
 TORRES, ERASMO M

 Address:
 14315 S.W. 180 TERR.
 Address:
 14315 S.W. 180 TERR.

 City-St-Zip:
 SOUTH MIAMI, FL 33177 US
 City-St-Zip:
 SOUTH MIAMI, FL 33177 US

Title: VP () Delete Title: VPST (X) Change () Addition

 Name:
 TORRES, GLORIA
 Name:
 TORRES, GLORIA I

 Address:
 14315 S.W. 180 TERR.
 Address:
 14315 S.W. 180 TERR.

 City-St-Zip:
 SOUTH MIAMI, FL 33177 US
 City-St-Zip:
 SOUTH MIAMI, FL 33177 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GLORIA I TORRES VPST 11/15/2005