

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000062328

Entity Name: CASINO SERVICES OF FLORIDA, INC.

FILED
Oct 09, 2006
Secretary of State

Current Principal Place of Business:

839 DELFINO PLACE
LAKE MARY, FL 32746

New Principal Place of Business:

2456 NORTHUMBRIA
SANFORD, FL 32771

Current Mailing Address:

839 DELFINO PLACE
LAKE MARY, FL 32746

New Mailing Address:

2456 NORTHUMBRIA
SANFORD, FL 32771

FEI Number: 20-2784367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNSTEIN, MELVYN D
839 DELFINO PLACE
LAKE MARY, FL 32746 US

Name and Address of New Registered Agent:

BERNSTEIN, MELVYN D
2456 NORTHUMBRIA
SANFORD, FL 32771 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: MELVYN D BERNSTEIN

10/09/2006

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: BERNSTEIN, MELVYN D
Address: 2456 NORTHUMBRIA
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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: MELVYN BERNSTEIN

PRES

10/09/2006

Electronic Signature of Signing Officer or Director

Date