

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000033751

Entity Name: SOARES SERVICES, INC.

FILED
Jun 09, 2008
Secretary of State

Current Principal Place of Business:

3551 CORONADO DRIVE
901
SARASOTA, FL 33901 US

Current Mailing Address:

3551 CORONADO DRIVE
901
SARASOTA, FL 33901 US

New Principal Place of Business:

2614 PINE LAKE
D
SARASOTA, FL 34237 US

New Mailing Address:

2614 PINE LAKE
D
SARASOTA, FL 34237 US

FEI Number: 20-4568634

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOARES, NILTON P
2905 NELSON STREET
1
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

METRO BUSINESS SOLUTIONS INC
5245 RAMSEY WAY
4
FORT MYERS, FL 33907 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: METRO BUSINESS SOLUTIONS INC

06/09/2008

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 (X) Delete
Name: SOARES, NILTON P
Address: 2905 NELSON STREET # 1
City-St-Zip: FORT MYERS, FL 33901 US

Title: VP () Delete
Name: SOARES, NILSON P
Address: 2905 NELSON STREET # 1
City-St-Zip: FORT MYERS, FL 33901 US

Title: D (X) Delete
Name: DA SILVA, KARINE P
Address: 2905 NELSON STREET # 1
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: SOARES, NILSON P
Address: 2614 PINE LAKE #D
City-St-Zip: SARASOTA, FL 34237 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NILSON P SOARES

P

06/09/2008

Electronic Signature of Signing Officer or Director

Date