

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000021529

FILED
Nov 10, 2009
Secretary of State

Entity Name: SUNCOAST CREDIT SOLUTIONS INC

Current Principal Place of Business:

1487 DEPEW ST SE
SUITE 300
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

PO BOX 621746
ORLANDO, FL 32862

New Mailing Address:

FEI Number: 56-2656026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BULLEN, GIFFORD
627 HEMLOCK LANE
LAKELAND, FL 33810 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: GIFFORD BULLEN

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: BULLEN, GIFFORD
Address: 5516 AVE H
City-St-Zip: BROOKLYN, NY 11234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GIFFORD BULLEN

Electronic Signature of Signing Officer or Director

MNGR

11/10/2009

Date