

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000060672

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: C&S FINANCIAL SERVICES OF DORAL, INC

## Current Principal Place of Business:

4420 NW 107 AVE  
304  
DORAL, FL 33178 US

## Current Mailing Address:

4420 NW 107 AVE  
304  
DORAL, FL 33178 US

## New Principal Place of Business:

6030 NW 99 AVENUE  
STE 400.  
DORAL, FL 33178 US

## New Mailing Address:

6030 NW 99 AVENUE  
400  
DORAL, FL 33178 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASTELLANO, CARLOS  
4420 NW 107 AVE  
304  
DORAL, FL 33178 US

## Name and Address of New Registered Agent:

NELSON, SALOM  
4420 NW 107 AVE  
304  
DORAL, FL 33178 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: NELSON SALOM

02/25/2009

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: D ( ) Delete  
Name: CASTELLANO, CARLOS  
Address: 4420 NW 107 AVE 304  
City-St-Zip: DORAL, FL 33178 US

Title: D ( ) Delete  
Name: SALOM, NELSON  
Address: 4420 NW 107 AVE 304  
City-St-Zip: DORAL, FL 33178 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: NELSON, SALOM  
Address: 6030 NW 99 AVENUE STE. 400  
City-St-Zip: DORAL, FL 33178 US

Title: D (X) Change ( ) Addition  
Name: SALOM, NELSON  
Address: 6030 NW. 99 AVENUE STE, 400  
City-St-Zip: DORAL, FL 33178 US

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: NELSON SALOM

PTE

02/25/2009

Electronic Signature of Signing Officer or Director

Date