

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000083813

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Entity Name:** DOLPHINS INVESTMENTS SERVICES CORP

**Current Principal Place of Business:**

5574 GAGNON TERRACE  
NORTH PORT, FL 34286

**New Principal Place of Business:**

1760 PALMETTO PALM WAY  
NORTH PORT, FL 34288

**Current Mailing Address:**

5574 GAGNON TERRACE  
NORTH PORT, FL 34286

**New Mailing Address:**

1760 PALMETTO PALM WAY  
NORTH PORT, FL 34288

**FEI Number:** 26-0598676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORES, ELAYNE Y  
5574 GAGNON TERRACE  
NORTH PORT, FL 34286 US

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

FLORES, ELAYNE Y  
1760 PALMETTO PALM WAY  
NORTH PORT, FL 34288 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: ELAYNE FLORES

03/25/2010

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: PS  
Name: FLORES, ELAYNE Y  
Address: 1760 PALMETTO PALM WAY  
City-St-Zip: NORTH PORT, FL 34288

Title: VTD  
Name: FLORES, MIGUEL A  
Address: 3131 NW 2ND STREET  
City-St-Zip: MIAMI, FL 33126

I hereby 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 all other like empowered.

SIGNATURE: ELAYNE FLORES

PS

03/25/2010

Electronic Signature of Signing Officer or Director

Date