

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000045328

FILED
Nov 05, 2009
Secretary of State

Entity Name: DORAL REALTY SOLUTIONS, INC.

Current Principal Place of Business:

3450 WEST 84TH STREET - SUITE 202D
HIALEAH, FL 33018

New Principal Place of Business:

Current Mailing Address:

3450 WEST 84TH STREET - SUITE 202D
HIALEAH, FL 33018

New Mailing Address:

FEI Number: 26-2602695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, PABLO
3450 WEST 84TH STREET - SUITE 202D
HIALEAH, FL 33018 US

Name and Address of New Registered Agent:

ANGELICA, GOMEZ
3450 WEST 84TH STREET - SUITE 202D
HIALEAH, FL 33018 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: ANGELICA GOMEZ

11/05/2009

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: P () Delete
Name: GARCIA, PABLO
Address: 7875 NW 12 STREET SUITE 101
City-St-Zip: MIAMI, FL 33126

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, PABLO
Address: 3450 WEST 84TH STREET - SUITE 202D
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VP () Change (X) Addition
Name: ANGELICA, GOMEZ
Address: 3450 WEST 84 STREET - SUITE 202 D
City-St-Zip: HIALEAH GARDENS, FL 33018

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: PABLO GARCIA

P

11/05/2009

Electronic Signature of Signing Officer or Director

Date