

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000061489

**Entity Name:** OLD TIME SERVICES INC.

**FILED**  
**Sep 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4720 EMERALD FOREST WAY, STE 2112  
ORLANDO, FL 32811 US

**New Principal Place of Business:**

**Current Mailing Address:**

4720 EMERALD FOREST WAY, STE 2112  
ORLANDO, FL 32811 US

**New Mailing Address:**

**FEI Number:** 27-0575040

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORES ROSAS, ALFONSO  
4720 EMERALD FOREST WAY, STE 2112  
ORLANDO, FL 32811 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:** ALFONZO FLORES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** FLORES ROSAS, ALFONSO  
**Address:** 4720 EMERALD FOREST WAY, STE 2112  
**City-St-Zip:** ORLANDO, FL 32811

**Title:** VP  
**Name:** HUTCHISON, ROXANA P  
**Address:** 4720 EMERALD FOREST WAY, STE 2112  
**City-St-Zip:** ORLANDO, FL 32811

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:** ALFONZO FLORES

P

09/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date