

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000080096

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Entity Name:** HOMESIDE PROPERTIES INC

**Current Principal Place of Business:**

4139 W VINE STREET  
101  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

4139 W VINE STREET  
101  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 27-3576548      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BUSTAMANTE, ALEJANDRO  
4139 W VINE STREET  
101  
KISSIMMEE, FL 34741 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:** ALEJANDRO J. BUSTAMANTE

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BUSTAMANTE, NELSON  
**Address:** 10119 COSTA DEL SOL BLVD  
**City-St-Zip:** DORAL, FL 33178

**Title:** VP  
**Name:** BUSTAMANTE, ALEJANDRO  
**Address:** 4139 W VINE STREET STE 101  
**City-St-Zip:** KISSIMMEE, FL 34741

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:** ALEJANDRO BUSTAMANTE

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

MR

02/10/2012

\_\_\_\_\_  
Date