

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P96000015841

**FILED**  
**Dec 05, 2011**  
**Secretary of State**

**Entity Name:** DETAILED SERVICES, INC.

**Current Principal Place of Business:**

1518 SE 46TH LANE  
CAPE CORAL, FL 33991 US

**New Principal Place of Business:**

1518 SE 46TH LANE  
CAPE CORAL, FL 33904 US

**Current Mailing Address:**

612 SW 6 AVE.  
CAPE CORAL, FL 33904

**New Mailing Address:**

612 SW 6 AVE.  
CAPE CORAL, FL 33991

**FEI Number:** 65-0686056

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WELSH, LOIS  
612 SW 6 AVE.  
CAPE CORAL, FL 33991 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:** LOIS WELSH

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** WELSH, ROBERT F  
**Address:** 612 SW 6 AVE  
**City-St-Zip:** CAPE CORAL, FL 33991

**Title:** DSVP  
**Name:** WELSH, LOIS M  
**Address:** 612 SW 6 AVE.  
**City-St-Zip:** CAPE CORAL, FL 33991

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:** LOIS WELSH

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

VP

12/05/2011

\_\_\_\_\_  
Date