

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000004448

**FILED**  
**Oct 19, 2010**  
**Secretary of State**

**Entity Name:** TREASURE COVE TITLE SERVICES, INC.

**Current Principal Place of Business:**

1550 MADRUGA AVENUE  
SUITE 309  
CORAL GABLES, FL 33146 US

**New Principal Place of Business:**

**Current Mailing Address:**

1550 MADRUGA AVENUE  
SUITE 309  
CORAL GABLES, FL 33146 US

**New Mailing Address:**

**FEI Number:** 65-0761417

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REY, MARIA  
1550 MADRUGA AVENUE  
SUITE 309  
CORAL GABLES, FL 33146 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:** MARIA REY

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** REY, MARIA  
**Address:** 1550 MADRUGA AVENUE, SUITE 309  
**City-St-Zip:** CORAL GABLES, FL 33146

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:** MARIA REY

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10/19/2010

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

\_\_\_\_\_  
Date