

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000102900

Entity Name: D'MEX FOOD SERVICE, INC.

FILED
Oct 22, 2004
Secretary of State

Current Principal Place of Business:

1110 WEST BELL STREET
AVON PARK, FL 33826 US

New Principal Place of Business:

1901 LONGLEAF BLVD
SUITE 100
LAKE WALES, FL 33853 US

Current Mailing Address:

1110 WEST BELL STREET
AVON PARK, FL 33826 US

New Mailing Address:

1901 LONGLEAF BLVD
SUITE 100
LAKE WALES, FL 33853 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAMEZ, CARLOS
1110 WEST BELL STREET
AVON PARK, FL 33826 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:

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: PD () Delete
Name: GAMEZ, CARLOS
Address: 1110 WEST BELL STREET
City-St-Zip: AVON PARK, FL 33826 US

Title: DIR () Delete
Name: GAMEZ, REMIGIO
Address: 1110 WEST BELL STREET
City-St-Zip: AVON PARK, FL 33826 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARLOS GAMEZ

PD

10/22/2004

Electronic Signature of Signing Officer or Director

Date