2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000011264

Address:

City-St-Zip:

3151 AUTUMNWOOD TRAIL

APOPKA, FL 32703

FILED Feb 16, 2006 Secretary of State

Entity Na	me: MARCO	S BUSTAMANTE, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
	UMNWOOD 1 FL 32703	RAIL			
Current Mailing Address:			New Mailing Address:		
	UMNWOOD 1 FL 32703	⁻ RAIL			
FEI Number	: 54-2140023	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address o	f New Registered Agent:	
3151 AUT	NTE, MARCOS UMNWOOD 1 FL 32703				
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU		S BUSTAMANTE			
Electronic Signature of Registered Age			ent	Date	
		93(2)(b), F.S., the corporation did nong ng Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P (BUSTAMANTE 3151 AUTUMN APOPKA, FL	IWOOD TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (BUSTAMANTE 3151 AUTUMN APOPKA, FL	WOOD TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SEC (BUSTAMANTE 3151 AUTUMN APOPKA, FL	WOOD TRAIL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TREA (BUSTAMANTE) Delete :, MARCOS	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: MARCOS BUSTAMANTE Ρ 02/16/2006