

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000045573

Entity Name: ADREID GROUP, INC.

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

24025 SW 108 AVENUE  
MIAMI, FL 33032

## **New Principal Place of Business:**

12515 ORANGE DR  
STE 804  
DAVIE, FL 33330

## **Current Mailing Address:**

5220 S UNIVERSITY DR  
STE C-102  
DAVIE, FL 33328

## **New Mailing Address:**

12515 ORANGE DR  
STE 804  
DAVIE, FL 33330

FEI Number: 20-0855951

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SILVA'S ENTERPRISE, INC  
5220 S UNIVERSITY DR  
STE C-102  
DAVIE, FL 33328 US

## **Name and Address of New Registered Agent:**

MANOSALVA OCANTO, ADRIANA  
12515 ORANGE DR  
STE 804  
DAVIE, FL 33330 US

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: ADRIANA MANOSALVA OCANTO

04/27/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: MANOSALVA OCANTO, ADRIANA  
Address: 1341 SEAGRAPE CIRCLE  
City-St-Zip: WESTON, FL 33326

Title: VD  
Name: OCANTO, WILLIAM  
Address: 1341 SEAGRAPE CIRCLE  
City-St-Zip: WESTON, FL 33326

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: ADRIANA MANOSALVA OCANTO

PD

04/27/2012

Electronic Signature of Signing Officer or Director

Date