

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000081887

**FILED**  
**Feb 11, 2009**  
**Secretary of State**

**Entity Name:** PARENT PARTNER'S CORPORATION

**Current Principal Place of Business:**

19901 SW 264 ST  
HOMESTEAD, FL 33031

**New Principal Place of Business:**

13301 SW 132 AVE  
SUITE 110  
MIAMI, FL 33186

**Current Mailing Address:**

19901 SW 264 ST  
HOMESTEAD, FL 33031

**New Mailing Address:**

13301 SW 132 AVE  
SUITE 110  
MIAMI, FL 33186

**FEI Number:** 34-2049175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RODRIGUEZ, MARIA T  
19901 SW 264 ST  
HOMESTEAD, FL 33031 US

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

VAZQUEZ-GARCIA, CRISTINA  
13301 SW 132 AVE  
SUITE 111  
MIAMI, FL 33186 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: CRISTINA VAZQUEZ-GARCIA

02/11/2009

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: PTSD ( ) Delete  
Name: RODRIGUEZ, MARIA  
Address: 19901 SW 264 ST  
City-St-Zip: HOMESTEAD, FL 33031

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: RODRIGUEZ, MARIA T  
Address: 13301 SW 132 AVE. #110  
City-St-Zip: MIAMI, FL 33186

Title: T ( ) Change (X) Addition  
Name: VAZQUEZ-GARCIA, CRISTINA  
Address: 13301 SW 132 AVE. #110  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Change (X) Addition  
Name: CHAU, NICOLE  
Address: 13301 SW 132 AVE  
City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: CRISTINA VAZQUEZ-GARCIA

T

02/11/2009

Electronic Signature of Signing Officer or Director

Date