2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000140651

Entity Name: FLORIDA INVEST CONSULTANTS CORP

FILED Oct 05, 2009 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business |
|--------------------------------------|---------------------------------|
| | |

8853 COMMODITY CIRCLE 8751 COMMODITY CIRCLE

12-14 12

ORLANDO, FL 32819 ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

8853 COMMODITY CIRCLE 8751 COMMODITY CIRCLE

ORLANDO, FL 32819 ORLANDO, FL 32819

FEI Number: 20-3651719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FUENTES, MIGUEL 8751 COMMODITY CIR UNIT 12-14

8751 COMMODITY CIR ORLANDO, FL 32819 ORLANDO, FL 32819 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.

FUENTES, MIGUEL

SIGNATURE: MIGUEL FUENTES 10/05/2009

> 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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FUENTES, MIGUEL FUENTES, MIGUEL Name: Name: 8853 COMMODITY CIRCLE UNIT 12-14 8751 COMMODITY CIRCLE UNIT 12 Address: Address:

City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

VΡ Title: VΡ Title: () Delete (X) Change () Addition

Name: MAIANTI, LUIGI Name: MAIANTI, LUIGI

8853 COMMODITY CIRCLE UNIT 12-14 8853 COMMODITY CIRCLE UNIT 12 Address: Address:

ORLANDO, FL 32819 ORLANDO, FL 32819 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title: FUENTES, MIGUEL FUENTES, MIGUEL Name: Name:

8751 COMMODITY CIRCLE UNIT 12 8853 COMMODITY CIRCLE UNIT 12 Address: Address:

City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

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.

Ρ SIGNATURE: MIGUEL FUENTES 10/05/2009