

2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 05, 2007
Secretary of State

DOCUMENT# P07000002410

Entity Name: CONNEXIONS FLORIDA, INC

Current Principal Place of Business:

3956 TOWN CENTER BLVD
SUITE 109
ORLANDO, FL 32837 US

New Principal Place of Business:

Current Mailing Address:

3956 TOWN CENTER BLVD
SUITE 109
ORLANDO, FL 32837 US

New Mailing Address:

FEI Number: 20-8207765 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHIRIBOGA, ANDRES
3956 TOWN CENTER BLVD
SUITE 109
ORLANDO, FL 32837 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: ANDRES CHRIBOGA

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: CEO () Delete
Name: FIGARI, EDUARDO
Address: 3956 TOWN CENTER BLVD STE 109
City-St-Zip: ORLANDO, FL 32837 US

Title: COO () Delete
Name: FIGARI, TERESA
Address: 3956 TOWN CENTER BLVD STE 109
City-St-Zip: ORLANDO, FL 32837 US

Title: S () Delete
Name: CHIRIBOGA, ANDRES
Address: 3956 TOWN CENTER BLVD STE 109
City-St-Zip: ORLANDO, FL 32837 US

Title: P () Delete
Name: FIGARI, ROLANDO
Address: 3956 TOWN CENTER BLVD STE 109
City-St-Zip: ORLANDO, FL 32837 US

Title: VP () Delete
Name: OBREGON, ERNESTO
Address: 3956 TOWN CENTER BLVD STE 109
City-St-Zip: ORLANDO, FL 32837 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: ROLANDO FIGARI

P

10/05/2007

Electronic Signature of Signing Officer or Director

Date