

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000084034

FILED  
Feb 03, 2011  
Secretary of State

**Entity Name:** EQUIPMENT CUTLER BAY CORP

**Current Principal Place of Business:**

8986 SW 225 STREET  
CUTLER BAY, FL 33190

**New Principal Place of Business:**

14750 SW 26 STREET  
209  
MIAMI, FL 33185

**Current Mailing Address:**

8986 SW 225 STREET  
CUTLER BAY, FL 33190

**New Mailing Address:**

14750 SW 26 STREET  
209  
MIAMI, FL 33185

FEI Number: 26-3454072

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PARENTE, BENITO  
8986 SW 225 STREET  
CUTLER BAY, FL 33190 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: MAURO PARENTE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PARENTE, BENITO  
Address: 8986 SW 225 STREET  
City-St-Zip: CUTLER BAY, FL 33190

Title: D  
Name: PARENTE, MAURO  
Address: 8986 SW 225 STREET  
City-St-Zip: CUTLER BAY, FL 33190

Title: D  
Name: PARENTE, JOSE  
Address: 8986 SW 225 STREET  
City-St-Zip: CUTLER BAY, FL 33190

Title: D  
Name: GIL, DOUGLAS  
Address: 9470 WEST VIEW DRIVE  
City-St-Zip: SHAWNEE HILLS, OH 43065

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: MAURO PARENTE

Electronic Signature of Signing Officer or Director

PD

02/03/2011

Date