

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 30, 2009
Secretary of State**

DOCUMENT# P94000074685

Entity Name: DANMARCO, INC.

Current Principal Place of Business:

3400 NE 192ND ST
APT 2105
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

3400 NE 192ND ST
APT 2105
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 65-0537954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SROUR, JACOB
3400 NE 192ND ST
APT 2105
AVENTURA, FL 33180 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: JACOB

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: VPD () Delete
Name: SROUR, JACOB
Address: 3400 NE 192ND ST APT 2105
City-St-Zip: AVENTURA, FL 33180

Title: TD () Delete
Name: SROUR, BEATRIZ
Address: 3400 NE 192N ST APT 2105
City-St-Zip: AVENTURA, FL 33180

Title: PD () Delete
Name: SROUR, MARK
Address: 3400 NE 192ND ST APT 2105
City-St-Zip: AVENTURA, FL 33180

Title: D () Delete
Name: SROUR, DANIEL
Address: 3400 NE 192ND ST APT 2105
City-St-Zip: AVENTURA, FL 33180

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:

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: MARK SROUR

Electronic Signature of Signing Officer or Director

PD

11/30/2009

Date