2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 07, 2009
Secretary of State

DOCUMENT# P08000098303

Entity Name: ELTROEN, INC.

Current Principal Place of Business:

2325 W PENSACOLA STREET #155
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

2325 W PENSACOLA STREET #155
TALLAHASSEE, FL 32304

New Mailing Address:

FEI Number: 80-0299736 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARBALLOSA, ELSA D
675 W PENSACOLA ST #A2
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

CARBALLOSA, ELSA D
2325 W. PENSACOLA STREET #155
TALLAHASSEE, FL 32304 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: ELSA D. CARBALLOSA 11/07/2009
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: P ( ) Delete
Name: CARBALLOSA, ELSA D
Address: 675 W PENSACOLA ST #A2
City-St-Zip: TALLAHASSEE, FL 32304

Title: S ( ) Delete
Name: SUCARINO, DIANA H
Address: 2325 W PENSACOLA STREET #155
City-St-Zip: TALLAHASSEE, FL 32304

Title: T ( ) Delete
Name: FERRER, SHARDUL A
Address: 675 W PENSACOLA ST #A2
City-St-Zip: TALLAHASSEE, FL 32304

Title: D ( ) Delete
Name: O'BLOCK, DENNIS
Address: 2220 SW 34TH ST #124
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete
Name: MENENDEZ, JUAN M
Address: 1201 E PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CARBALLOSA, ELSA D
Address: 2325 W PENSACOLA ST #155
City-St-Zip: TALLAHASSEE, FL 32304

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: ELSA D. CARBALLOSA PRE 11/07/2009
Electronic Signature of Signing Officer or Director Date