

# 2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P11000068433

**FILED**  
**Oct 18, 2013**  
**Secretary of State**

**Entity Name:** COPASSA INCORPORATED

**Current Principal Place of Business:**

389 NW 94TH TERRACE  
PLANTATION, FL 33324 US

**New Principal Place of Business:**

950 SOUTH PINE ISLAND  
SUITE 1009  
PLANTATION, FL 33324 US

**Current Mailing Address:**

389 NW 94TH TERRACE  
PLANTATION, FL 33324 US

**New Mailing Address:**

950 SOUTH PINE ISLAND  
SUITE 1009  
PLANTATION, FL 33324 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

GUICHARD, LIDA  
389 NW 94TH TERRACE  
PLANTATION, FL 33324 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:** LIDA T. GUICHARD

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** GUICHARD, LIDA  
**Address:** 389 NW 94TH TERRACE  
**City-St-Zip:** PLANTATION, FL 33324 US

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:** LIDA T. GUICHARD

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MS

10/18/2013

\_\_\_\_\_  
Date