

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 431076

FILED
Jan 31, 2008
Secretary of State

Entity Name: MARTIN BROTHERS ENTERPRISES, INC.

Current Principal Place of Business:

P.O. BOX 650632
MIAMI, FL 33265

New Principal Place of Business:

3616 SW 108 AVE
MIAMI, FL 33165

Current Mailing Address:

P.O. BOX 650632
MIAMI, FL 33265

New Mailing Address:

P.O. BOX 650632
MIAMI, FL 33165

FEI Number: 59-1545349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, LAZARO J ESQUIRE
3636 SW 8 ST. STE. 206
MIAMI, FL 33135 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: FIDE R. MARTIN

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: MARTIN, FIDE R
Address: 3616 SW 108 AVE
City-St-Zip: MIAMI, FL 33165 US

Title: V () Delete
Name: MARTIN, PAULINO F
Address: 3616 SW 108 AVE
City-St-Zip: MIAMI, FL 33165 US

Title: T S () Delete
Name: MARTIN, ANTHONY R SEC. TR
Address: 2601 SW 77 CT
City-St-Zip: MIAMI, FL 33155 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T S (X) Change () Addition
Name: MARTIN, ANTHONY R SEC. TR
Address: 6015 SW 28 ST
City-St-Zip: MIAMI, FL 33155 US

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: FIDE R. MARTIN

Electronic Signature of Signing Officer or Director

PS

01/31/2008

Date