2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 435433

7900 N.W. 67TH STREET

MIAMI, FL 33166

Address: City-St-Zip:

FILED May 18, 2005 Secretary of State

Entity Name: H.M. SANCHEZ DISTRIBUTOR, INC. **Current Principal Place of Business: New Principal Place of Business:** 7900 N.W. 67TH STREET MIAMI, FL 331662631 **Current Mailing Address: New Mailing Address:** 7900 N.W. 67TH STREET MIAMI, FL 331662631 FEI Number: 59-1519398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SANCHEZ, MATEO 7900 N.W. 67 ST. US MIAMI, FL 33166 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: MATEO SANCHEZ 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SANCHEZ, MATEO, Name: Name: 7900 N.W. 67TH STREET Address: Address: City-St-Zip: MIAMI, FL 33166 City-St-Zip: Title: Title: () Change () Addition () Delete Name: SANCHEZ, ZUNILDA, Name: 7900 N.W. 67TH STREET Address: Address: MIAMI, FL 33166 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition SANCHEZ, ANTONIO, Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: MATEO SANCHEZ PD 05/18/2005