

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 498946

**FILED**  
**Oct 06, 2014**  
**Secretary of State**

**Entity Name:** NEIGHBORHOOD FISH FARM AND PET STORE, INC.

**Current Principal Place of Business:**

12150 S.W. 45TH STREET  
MIAMI, FL 33175

**New Principal Place of Business:**

**Current Mailing Address:**

12150 S.W. 45TH STREET  
MIAMI, FL 33175

**New Mailing Address:**

**FEI Number:** 59-1660155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOAS, DAVID C., C.P.A.  
DAVID C BOAS CPA PA  
11440 N KENDALL DR #205  
MIAMI, FL 331761024 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:** DAVID BOAS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BRADWELL, RICHARD  
**Address:** 12150 S.W. 45TH ST.  
**City-St-Zip:** MIAMI, FL 33175

**Title:** SD  
**Name:** BRADWELL, NANCY  
**Address:** 12150 S.W. 45TH ST.  
**City-St-Zip:** MIAMI, FL 33175

**Title:** VP  
**Name:** BRADWELL, WILL  
**Address:** 12150 S.W. 45TH ST.  
**City-St-Zip:** MIAMI, FL 33175

**Title:** VP  
**Name:** BRADWELL, ORION  
**Address:** 12150 S.W. 45TH ST.  
**City-St-Zip:** MIAMI, FL 33175

**Title:** VP  
**Name:** BRADWELL, DESTIN  
**Address:** 12150 S.W. 45TH ST.  
**City-St-Zip:** MIAMI, FL 33175

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:** WILL BRADWELL

VP

10/06/2014

Electronic Signature of Signing Officer or Director

Date