2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 674448

FILED Oct 04, 2006 Secretary of State

Entity Name: FLOCO ENTERPRISES, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	LANTIC BLVD. O BEACH, FL				
Current Mailing Address:			New Mailing Address:		
	LANTIC BLVD. O BEACH, FL				
El Numbe	r: 59-2043659	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:			
00 E AŤI OMPAN	DONALD LANTIC BLVD O BCH, FL 330				
		submits this statement for the p	ourpose of changing its registe	red office or registered agent, or both	
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registe	red office of registered agent, or both	
the Stat	e of Florida. RE: DONALD	SHIRAR			
the Stat	e of Florida. RE: DONALD Electror	SHIRAR nic Signature of Registered Ag	ent	Date	
the Stat	e of Florida. RE: DONALD Electror nce with s. 607.19	SHIRAR Signature of Registered Age (3(2)(b), F.S., the corporation did no	ent		
the Stat GNATU accordar lection Ca	e of Florida. RE: DONALD Electror nce with s. 607.19	SHIRAR nic Signature of Registered Agr 3(2)(b), F.S., the corporation did not g Trust Fund Contribution ().	ent ot receive the prior notice.	red office or registered agent, or both Date GES TO OFFICERS AND DIRECTO	
the Stat IGNATU accordar lection Ca	RE: DONALD Electron The second of the second	SHIRAR SHIRAR Signature of Registered Age Signature of Registered Age	ent ot receive the prior notice.	Date	
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accordar ection Ca FFICER ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	RE: DONALD Electror Ce with s. 607.19 Impaign Financin S AND DIREC P (SHIRAR, JUDY 300 E ATLANTI POMPANO BCI T (SHIRAR, DONA 300 E ATLANTI POMPANO BCI	SHIRAR nic Signature of Registered Ag 3(2)(b), F.S., the corporation did not grow from Contribution (). TORS: Delete C BLVD H, FL 00000, Delete KLD, C BLVD H, FL 00000, Delete DEBORAH S C BLVD	ent of receive the prior notice. ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	Date GES TO OFFICERS AND DIRECTO () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD S	HIRAR	T	10/04/2006
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