

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000004517

Entity Name: OCP DELAWARE CORP.

FILED  
Oct 13, 2009  
Secretary of State

## Current Principal Place of Business:

ONE COMMERCE CENTER  
1201 ORANGE ST #600  
WILMINGTON, DE 19899

## New Principal Place of Business:

## Current Mailing Address:

18495 S DIXIE HWY  
PMB 107  
CUTLER BAY, FL 33157

## New Mailing Address:

FEI Number: 90-0413804      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUBOIS, JOHN E  
17575 OLD CUTLER ROAD  
PALMETTO BAY, FL 33157      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: JOHN DUBOIS

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: C      ( ) Delete  
Name: LUCATORTO, JOSEPH  
Address: 20 ORCHID STREET  
City-St-Zip: FLORAL PARK, NY 11001

Title: VCP      ( ) Delete  
Name: DUBOIS, JOHN  
Address: 18495 S DIXIE HWY  
City-St-Zip: PALMETTO BAY, FL 33157

Title: DS      ( ) Delete  
Name: NANJI, SUHAIL  
Address: 6811 NW 117TH AVE  
City-St-Zip: PARKLAND, FL 33076

Title: DT      ( ) Delete  
Name: ERONCIG, JAMES  
Address: 95 EDGEWATER DR STE 101  
City-St-Zip: MIAMI, FL 33133

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JOHN DUBOIS

Electronic Signature of Signing Officer or Director

PRES

10/13/2009

Date