

2009 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Feb 06, 2009
Secretary of State**

DOCUMENT# H73946

Entity Name: SLOAN-BRADLEY CORP.

Current Principal Place of Business:

901 PONCE DE LEON BLVD.
500
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

901 PONCE DE LEON BLVD.
500
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-2573026 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, CARL H.
905 PONCE DE LEON BLVD
500
CORAL GABLES, FL 33134 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: CARL H. HOFFMAN

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOFFMAN, CARL H.,
Address: 900 ANDRES AVENUE
City-St-Zip: CORAL GABLES, FL

Title: D () Delete
Name: WESTLAKE, ROBERT G.,
Address: 3675 PARK LANE
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:

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: CARL H. HOFFMAN

Electronic Signature of Signing Officer or Director

PRES

02/06/2009

Date