2004 FOR PROFIT CORPORATION REINSTATEMENT

1. Entity Name	MENT-#'K38625 LL DADDY, CORP.					FILED 04 OCT 28 PM 2: 45				
Principal Place	e of Business	Mailing Address			1					
7325 S.W. 8TH ST MIAMI, FL 33144-4539		7325 S.W. 8TH ST MIAMI, FL 33144-4539			SECA TALLA	RETARY OF ST AHASSEE, FLO	ATE ORIDA			
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			10262004	REIN-P	CR2E0	98 (6/04)		
City & State		City & State			4. FEI Number 65-007			<u> </u>	plied For t Applicable	
Zip	Country Zip		Country	/	5. Certificate	of Status Desired		8.75 Add		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
Name										
JOSE A. HERNANDEZ, SR. 5664 S. W. 2ND STREET MIAMI, FL 33134				Street Address (P.O. Box Number is Not Acceptable)						
, , -								1		
				City			FL	Zip Code		
	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registered	office or registe	red agent, or bo	th, in the State of Flor	rida. I am fa	miliar with,	and accept	
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00										
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFFI	CERS AND I	DIRECTORS	3 IN 11	
TITLE			TITLE NAME					Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	5664 S.W. 2ND STREET STREET			ADDRESS T-ZIP	800042281048 10/28/0401033014 **!50.00					
TITLE		☐ Delete	TITLE					☐ Change	Addition	
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	ADDRES\$ T-ZIP			_			
TITLE	Approximation of the second se	Delete	TITLE			man of the same and the same and the same		Change	Addition	
NAME STREET ADDRESS			NAME STREET	ADDRESS						
CITY-ST-ZIP			CITY-S	T-ZIP						
TITLE Name		☐ Delete	TITLE NAME					Change	☐ Addition	
STREET ADDRESS				ADDRESS						
CITY-ST-ZIP			CITY-S	T-ZIP					Prog. 5 4 1774	
TITLE NAME		☐ Delete	TITLE					Change	Addition	
STREET ADDRESS			STREET	ADDRESS		\\\\\\\				
CITY-ST-ZIP			CITY-S	T-ZIP		#111	1			
TITLE NAME		C.J. Delete	TITLE			P	•	Change	Addition	
STREET ADDRESS				ADDRESS						
CITY-ST-ZIP				\ 		·				
12. I hereby certify that the information supplied with this filing does not quelify 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 accordate and that my 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 employered this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address; with all other the empowered. SIGNATURE:										
SIGNATURE. SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #										

The Small Daddy, Corp. 7325 SW 8th Street Miami, FL 33144

October 25, 2004

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Annual Report

Dear Dept. of State:

I was recently informed by my financial institution that my corporation, The Small Daddy, Corp." has been dissolved. I have not received a renewal notice for this year. There has been major road construction which has affected the accessibility of my storefront; this might explain why I have not received any notifications.

I have enclosed a check for the amount of \$150.00 and the reinstatement form for 2004. Please waive the late filing penalty this one time, if you review my records you will see that I have always filed on time.

Thank you in advance.

Sincerely,

Jose Hernandez

President