

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K65083

FILED
Oct 01, 2009
Secretary of State

Entity Name: CORAL OAKS CORPORATION

Current Principal Place of Business:

10530 S.W. 57TH AVE.
PINECREST, FL 33156

New Principal Place of Business:

Current Mailing Address:

10530 S.W. 57TH AVE.
PINECREST, FL 33156

New Mailing Address:

FEI Number: 65-0099525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAFF, ALAN B
10530 SW 57 AVENUE
PINECREST, FL 33156 US

Name and Address of New Registered Agent:

RAFF, ANN R
10530 SW 57 AVENUE
PINECREST, FL 33156 US

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: ANN R RAFF

10/01/2009

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: RAFF, ALAN B
Address: 11096 MONFERO ST
City-St-Zip: CORAL GABLES, FL 33156

Title: P () Delete
Name: ALLEN, SHERRI
Address: 5851 SW 84 ST.
City-St-Zip: SOUTH MIAMI, FL 33143 US

Title: T () Delete
Name: CHEKANOW, FRED
Address: 6297 SW 102 STREET
City-St-Zip: PINECREST, FL 33156

Title: S () Delete
Name: MALININ, DOROTHY
Address: 360 ATLANTIC RD
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: RAFF, ANN R
Address: 11096 MONFERO ST
City-St-Zip: CORAL GABLES, FL 33156

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

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

Title: S (X) Change () Addition
Name: SOCHET, ADAM
Address: 7850 SW 99 STREET
City-St-Zip: MIAMI, FL 33156

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: ADAM R SOCHET

SECR

10/01/2009

Electronic Signature of Signing Officer or Director

Date