

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L93307

**FILED**  
**Mar 07, 2013**  
**Secretary of State**

**Entity Name:** CAYAVEC ENTERPRISES, INC.

**Current Principal Place of Business:**

119 FOREST LAKES BLVD.  
OLDSMAR, FL 34677 US

**New Principal Place of Business:**

**Current Mailing Address:**

119 FOREST LAKES BLVD.  
OLDSMAR, FL 34677 US

**New Mailing Address:**

**FEI Number:** 59-3024822

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAYAVEC, LORI L.  
3986 CAPITOL DR  
PALM HARBOR, FL 34685 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:** LORI CAYAVEC

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DPT  
**Name:** CAYAVEC, ROBERT W.  
**Address:** 3986 CAPITOL DRIVE  
**City-St-Zip:** PALM HARBOR, FL 34685 US

**Title:** DVPS  
**Name:** CAYAVEC, LORI L.  
**Address:** 3986 CAPITOL DRIVE  
**City-St-Zip:** PALM HARBOR, FL 34685 US

I hereby 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 all other like empowered.

**SIGNATURE:** LORI CAYAVEC

VP

03/07/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date