

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# M05551

FILED
Nov 24, 2004
Secretary of State

Entity Name: DE OLIVEIRA & ASSOCAITES, P.A.

Current Principal Place of Business:

2701 LE JEUNE ROAD
410
CORAL GABLES, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

2701 LE JEUNE ROAD
410
CORAL GABLES, FL 33134 US

New Mailing Address:

FEI Number: 59-2451112 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE OLIVEIRA, CRISTINA
2701 LEJEUNE RD.
410
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: _____

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: PD () Delete
Name: DE OLIVEIRA, CRISTIN, A
Address: 2701 LEJEUNE RD STE 410
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CRISTINA DE OLIVEIRA

OD

11/24/2004

Electronic Signature of Signing Officer or Director

Date