## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P00000039450

Entity Name: FOTOQUICK INC.

FILED Sep 28, 2009 Secretary of State

Entity Nai	me: FOTOQUIC	K INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10421 NW 28 ST D-102 MIAMI, FL 33172			17067 NW 20TH ST PEMBROKE PINES, F	17067 NW 20TH ST PEMBROKE PINES, FL 33028	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
10421 NW D-102 MIAMI, FL			17067 NW 20TH ST PEMBROKE PINES, F	EL 33028	
FEI Number:	: 65-1000363	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MARIN DIAZ, CARLOS J 10421 NW 28 ST D-102 MIAMI, FL 33172 US			MARIN, CARLOS J P 17067 NW 20TH ST PEMBROKE PINES, F		
	named entity su e of Florida.	bmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: CARLOS J MARIN				09/28/2009	
	Electronic	Signature of Registered Age	ent	Date	
		2)(b), F.S., the corporation did no rust Fund Contribution (  ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT () D MARIN, CARLOS 10421 NW 28 ST MIAMI, FL 33172	SUITE D-102	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D MARIN, CARLOS 10421 NW 28 ST MIAMI, FL 33172	SUITE D-102	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VPS () D ROZO, ADRIANA	elete M	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: CARLOS J MARIN P 09/28/2009

10421 NW 28 ST SUITE D-102

MIAMI, FL 33172

Address: City-St-Zip: