

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000052679

FILED
Mar 26, 2009
Secretary of State

Entity Name: VELIS & ASSOCIATES, P.A.

Current Principal Place of Business:

5455 SW 8 STREET
STE 220
MIAMI, FL 33134

New Principal Place of Business:

2100 PONCE DE LEON, BLVD.,
SUITE 1111
CORAL GABLES, FL 33134

Current Mailing Address:

VIDAL MARINO VELIS
P.O. BOX 14-0729
MIAMI, FL 33134

New Mailing Address:

FEI Number: 05-0019318 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELIS, VIDAL MARINO
5455 SW 8 STREET
SUITE 220
MIAMI, FL 33134 US

Name and Address of New Registered Agent:

VELIS, VIDAL MARINO
2100 PONCE DE LEON, BLVD.,
SUITE 1111
CORAL GABLES, FL 33134 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: VIDAL MARINO VELIS

03/26/2009

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: PD () Delete
Name: VELIS, VIDAL MARINO
Address: P.O. BOX 14-0729
City-St-Zip: CORAL GABLES, FL 33114

Title: D () Delete
Name: VELIS, JOSEFA M.
Address: 5455 SW 8 STREET, SUITE 220
City-St-Zip: MIAMI, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: VELIS, JOSEFA M.
Address: P.O. BOX 14-0729
City-St-Zip: CORAL GABLES, FL 33134

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: VIDAL MARINO VELIS

P/D

03/26/2009

Electronic Signature of Signing Officer or Director

Date