

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000078057

Entity Name: INDUMAR SEAFOOD, CORP.

FILED
Nov 29, 2006
Secretary of State

Current Principal Place of Business:

1637 BONAVENTURE BLVD
WESTON, FL 33326 US

Current Mailing Address:

P.O. BOX 267186
WESTON, FL 33326 US

New Principal Place of Business:

2853 EXECUTIVE PARK DRIVE
SUITE 201
WESTON, FL 33331 US

New Mailing Address:

P.O. BOX 267186
WESTON, FL 33331 US

FEI Number: 65-1033851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANEZ, CARLA
1637 BONAVENTURE BLVD.
WESTON, FL 33326 US

Name and Address of New Registered Agent:

ANEZ, CARLA
2853 EXECUTIVE PARK DRIVE
SUITE 201
WESTON, FL 33331 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: CARLA ANEZ

11/29/2006

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: RINCON, EDWIN
Address: 1637 BONAVENTURE BLVD
City-St-Zip: WESTON, FL 33326 US

Title: VD () Delete
Name: OSORIO, ALFREDO
Address: 1637 BONAVENTURE BLVD
City-St-Zip: WESTON, FL 33326 US

Title: SD () Delete
Name: VALLES, ESTEBAN
Address: 1637 BONAVENTURE BLVD
City-St-Zip: WESTON, FL 33326 US

Title: TD (X) Delete
Name: ANEZ, CARLA
Address: 1637 BONAVENTURE BLVD
City-St-Zip: WESTON, FL 33326 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RINCON, EDWIN
Address: 2853 EXECUTIVE PARK DRIVE
City-St-Zip: WESTON, FL 33331 US

Title: VD (X) Change () Addition
Name: OSORIO, ALFREDO
Address: 2853 EXECUTIVE PARK DRIVE
City-St-Zip: WESTON, FL 33331 US

Title: TD (X) Change () Addition
Name: ANEZ, CARLA J
Address: 2853 EXECUTIVE PARK DRIVE
City-St-Zip: WESTON, FL 33331 US

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 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: CARLA ANEZ

TD

11/29/2006

Electronic Signature of Signing Officer or Director

Date