

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000016308

FILED
Jun 10, 2005
Secretary of State

Entity Name: VILLA CLARA ENTERPRISES, INC.

Current Principal Place of Business:

13140 NW 45 AVENUE
OPA LOCKA, FL 33054

New Principal Place of Business:

12847 NW 45TH AVE.
OPA LOCKA, FL 33054

Current Mailing Address:

13140 NW 45 AVENUE
OPA LOCKA, FL 33054

New Mailing Address:

12847 NW 45TH AVE.
OPA LOCKA, FL 33054

FEI Number: 65-1079072

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REQUEJO, ANTONIO
13140 NW 45 AVENUE
OPA LOCKA, FL 33054 US

Name and Address of New Registered Agent:

REQUEJO, ANTONIO
12847 NW 45TH AVE.
OPA LOCKA, FL 33054 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: ANTONIO REQUEJO

06/10/2005

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: REQUEJO, ANTONIO J
Address: 15941 SW 53 COURT
City-St-Zip: FT LAUDERDALE, FL 33331

Title: VD () Delete
Name: GEILIN, ELSA M
Address: 15941 SW 53 COURT
City-St-Zip: FT LAUDERDALE, FL 33331

Title: VD () Delete
Name: ESPINOSA, DOMINGO
Address: 325 WEST 55 STREET
City-St-Zip: HIALEAH, FL 33014

Title: STD () Delete
Name: REQUEJO, ANTONIO
Address: 19471 NW 8 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ANTONIO REQUEJO

PD

06/10/2005

Electronic Signature of Signing Officer or Director

Date