

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000065102

Entity Name: LA CEIBA NURSERY, INC.

FILED
Sep 19, 2006
Secretary of State

Current Principal Place of Business:

3190 NW 106TH ST
MIAMI, FL 33147

New Principal Place of Business:

13515 NW 42ND AVE
MIAMI, FL 33054

Current Mailing Address:

3190 NW 106TH ST
MIAMI, FL 33147

New Mailing Address:

19253 NW 48TH AVE
MIAMI, FL 33055

FEI Number: 65-1117467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTAGENA, RAFAEL
3190 NW 106TH ST
MIAMI, FL 33147 US

Name and Address of New Registered Agent:

CARTAGENA, RAFAEL
19253 NW 48TH AVE
MIAMI, FL 33055 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: RAFAEL CARTAGENA

09/19/2006

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: CARTAGENA, RAFAEL
Address: 3190 NW 106TH ST
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARTAGENA, RAFAEL
Address: 19253 NW 48TH AVE
City-St-Zip: MIAMI, FL 33055

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: RAFAEL CARTAGENA

PD

09/19/2006

Electronic Signature of Signing Officer or Director

Date