

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000076599

Entity Name: JEFECO ENTERPRISES, INC.

FILED  
Aug 22, 2006  
Secretary of State

## Current Principal Place of Business:

7545 E. TREASURE DRIVE  
#7H  
NORTH BAY VILLAGE, FL 33141

## New Principal Place of Business:

545 HORSE CLUB AVE.  
CLEWISTON, FL 33440

## Current Mailing Address:

1720 NE 79 ST CSWY  
SUITE 113  
NORTH BAY VILLAGE, FL 33141

## New Mailing Address:

P.O.BOX 416646  
MIAMI BEACH, FL 33141

FEI Number: 65-1129267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE FARIA, JOSE  
1720 NE 79 ST CSWY  
STE 113  
NORTH BAY VILLAGE, FL 33141 US

## Name and Address of New Registered Agent:

DE FARIA, JOSE  
545 HORSE CLUB AVE.  
CLEWISTON, FL 33440 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: JOSE DE FARIA

08/22/2006

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: DE FARIA, JOSE  
Address: 1720 NE 79TH ST CSWY, STE 113  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: SVTD ( ) Delete  
Name: DE FARIA, SANDRA  
Address: 1720 NE 79TH ST CSWY, STE 113  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: DE FARIA, JOSE  
Address: 545 HORSE CLUB AVE.  
City-St-Zip: CLEWISTON, FL 33440

Title: SVPD (X) Change ( ) Addition  
Name: DE FARIA, SANDRA  
Address: 545 HORSE CLUB AVE.  
City-St-Zip: CLEWISTON, FL 33440

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: SANDRA DE FARIA

SVPD

08/22/2006

Electronic Signature of Signing Officer or Director

Date