2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000092929

FILED Jun 22, 2009 Secretary of State

Entity Nam	ie: 5 M AND	N, INC.					
Current Pr	incipal Place	of Business:	New Prince	New Principal Place of Business:			
6121 N FLC TAMPA, FL	ORIDA . 336046623						
Current Ma	ailing Addres	ss:	New Maili	ng Address	:		
6121 N FLO TAMPA, FL	ORIDA . 336046623						
FEI Number:	65-1143490	FEI Number Applied For ()	FEI Number Not App	licable ()	Certifica	ate of Status Desir	red ()
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
,	ORIDA . 336046623	US submits this statement for th	e purpose of changing	ts reaistered	l office or r	registered agent	c. or both.
in the State			e parpose of changing	io regiotores		egiotorea agem	., 01 2011,
SIGNATUR	RE: MUTAZ E	ELBOOZ					
	Electror	nic Signature of Registered	Agent			Date	
		3(2)(b), F.S., the corporation did grust Fund Contribution ().	d not receive the prior notic	e.			
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () BOOZ, MUTAZ 6121 N FLORII TAMPA, FL 33	DA .	Title: Name: Address: City-St-Zip:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	VP () EL BOOZE, MU 1314 W CARIS	SA CT.	Title: Name: Address: City-St-Zin:	EL BOOZ, M 1314 W CAR	ISSA CT.	() Addition	

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: MUJAHED EL BOOZ VΡ 06/22/2009