

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000098023

Entity Name: ADOXEN, CORP.

FILED
Nov 14, 2009
Secretary of State

Current Principal Place of Business:

4264 SUSSEX AVE
LAKE WORTH, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

4264 SUSSEX AVE
LAKE WORTH, FL 33461 US

New Mailing Address:

FEI Number: 65-1143506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARO, JOSE L P
4264 SUSSEX AVENUE
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

PARO, JOSE L B
4264 SUSSEX AVENUE
LAKE WORTH, FL 33461 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 PARO

11/14/2009

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: P () Delete
Name: PARO, JOSE L
Address: 4264 SUSSEX AVE
City-St-Zip: LAKE WORTH, FL 33461

Title: V () Delete
Name: PARO, MARILDA P
Address: 4264 SUSSEX AVE
City-St-Zip: LAKE WORTH, FL 33461

Title: T () Delete
Name: PARO, RODRIGO P
Address: 4264 SUSSEX AVE
City-St-Zip: LAKE WORTH, FL 334461

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARO, JOSE L B
Address: 4264 SUSSEX AVE
City-St-Zip: LAKE WORTH, FL 33461

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

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

Title: S () Change (X) Addition
Name: PARO, RAFAEL G P
Address: 4264 SUSSEX AVE
City-St-Zip: LAKE WORTH, FL 33461

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: JOSE PARO

P

11/14/2009

Electronic Signature of Signing Officer or Director

Date