

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000099134

Entity Name: MR. PANAMA, INC.

FILED  
Nov 30, 2009  
Secretary of State

## Current Principal Place of Business:

459 NE 167 STREET  
NORTH MIAMI BEACH, FL 331623906

## New Principal Place of Business:

## Current Mailing Address:

459 NE 167 STREET  
NORTH MIAMI BEACH, FL 331623906

## New Mailing Address:

FEI Number: 82-0547994

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENDEZ, EDUARDO  
17830 NE 6 AVE.  
NORTH MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

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: EDUARDO MENDEZ

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: MENDEZ, EDUARDO  
Address: 459 NE 137 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 331623906

Title: SD ( ) Delete  
Name: MENDEZ, DAYRA C  
Address: 459 NE 137 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 331623906

Title: VP ( ) Delete  
Name: MENDEZ, CHRISTIAN  
Address: 459 NE 137 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 331623906

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MENDEZ, EDUARDO  
Address: 459 NE 167 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 331623906

Title: SD (X) Change ( ) Addition  
Name: MENDEZ, DAYRA C  
Address: 459 NE 167 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 331623906

Title: VP (X) Change ( ) Addition  
Name: MENDEZ, CHRISTIAN  
Address: 459 NE 167 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 331623906

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: EDUARDO MENDEZ

Electronic Signature of Signing Officer or Director

PRES

11/30/2009

Date