2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000118088

1720 S.W. 137 WAY

MIRAMAR, FL 33027

Address: City-St-Zip:

Entity Name: SOUTHERN GLADES CORPORATION

FILED Mar 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1359 WASHINGTON AVE MIAMI BEACH, FL 33139			1720 S.W. 137 WAY MIRAMAR, FL 33027		
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1359 WASHINGTON AVE MIAMI BEACH, FL 33139			1720 S.W. 137 WAY MIRAMAR, FL 33027	==	
FEI Number	: 30-0030421	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MIAMI BE	SHINGTON AVE ACH, FL 33139	US			
	e named entity si e of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE: DIPAK MA	LLIK			
	Electroni	c Signature of Registered Ag	ent	Date	
		(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I MALLIK, DIPAK 1359 WASHING MIAMI BEACH, F	TON AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPT () BAKFIER, KHAR 1300 LINCOLNR MIAMI BEACH, F	D., #204	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S ()I SHAKILA, AZAM	Delete	Title: Name:	() Change () 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.

Address:

City-St-Zip:

SIGNATURE: SHAKILA AZAM S 03/13/2009