

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000062861

**FILED**  
**Nov 04, 2010**  
**Secretary of State**

**Entity Name:** FORTBENTON LABORATORIES S.A., INC.

**Current Principal Place of Business:**

2033 W MCNAB RD  
BAYS G & H  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

3960 N. ANDREWS AVE.  
OAKLAND PARK, FL 33309

**Current Mailing Address:**

2033 W MCNAB RD  
BAYS G & H  
POMPANO BEACH, FL 33069

**New Mailing Address:**

3960 N. ANDREWS AVE.  
OAKLAND PARK, FL 33309

**FEI Number:** 27-0015255

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STUPARITZ, ALAN  
900 E ATLANTIC BLVD STE 17  
POMPANO BCH, FL 33060 US

**Name and Address of New Registered Agent:**

SMITH, CHRISTIAN L  
3960 N. ANDREWS AVE.  
OAKLAND PARK, FL 33309 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: CHRISTIAN LEO SMITH

11/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VDST  
Name: SMITH, LAURA L  
Address: 824 SE 8TH ST  
City-St-Zip: FT LAUDERDALE, FL 33316

Title: DP  
Name: GOMEZ, ALFREDO O  
Address: 824 SE 8TH ST  
City-St-Zip: FT LAUDERDALE, FL 33316

I hereby 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 all other like empowered.

SIGNATURE: SMITH LAURA L.

VDST

11/04/2010

Electronic Signature of Signing Officer or Director

Date