

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000135327

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** ENIO CORPORATION

**Current Principal Place of Business:**

2455 EAST SUNRISE BOULEVARD  
SUITE 504  
FORT LAUDERDALE, FL 33304

**New Principal Place of Business:**

2455 EAST SUNRISE BOULEVARD  
SUITE 504  
FORT LAUDERDALE, FL 33304 US

**Current Mailing Address:**

2455 EAST SUNRISE BOULEVARD  
SUITE 504  
FORT LAUDERDALE, FL 33304

**New Mailing Address:**

2455 EAST SUNRISE BOULEVARD  
SUITE 504  
FORT LAUDERDALE, FL 33304 US

**FEI Number:** 90-0104797

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IERACI, PIO  
2455 EAST SUNRISE BOULEVARD  
SUITE 504  
FORT LAUDERDALE, FL 33304 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:** PIO IERACI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** LENCI, FILIPPO  
**Address:** 2455 EAST SUNRISE BOULEVARD SUITE 504  
**City-St-Zip:** FORT LAUDERDALE, FL 33304 US

**Title:** D  
**Name:** LENCI CRUMP, JUDY  
**Address:** 2455 EAST SUNRISE BOULEVARD SUITE 504  
**City-St-Zip:** FORT LAUDERDALE, FL 33304 US

**Title:** D  
**Name:** LENCI, EMILIA  
**Address:** 2455 EAST SUNRISE BOULEVARD SUITE 504  
**City-St-Zip:** FORT LAUDERDALE, FL 33304 US

**Title:** D  
**Name:** LENCI, PIER FILIPPO  
**Address:** 2455 EAST SUNRISE BOULEVARD SUITE 504  
**City-St-Zip:** FORT LAUDERDALE, FL 33304 US

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:** FILIPPO LENCI

D

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date