

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000009329

FILED
Sep 08, 2005
Secretary of State

Entity Name: MINERCO INTERNACIONAL, INC.

Current Principal Place of Business:

P.O. BOX 297244
PEMBROKE PINES, FL 33029

New Principal Place of Business:

14315 NW 14 STREET
PEMBROKE PINES, FL 33028

Current Mailing Address:

P.O. BOX 297244
PEMBROKE PINES, FL 33029

New Mailing Address:

14315 NW 14 STREET
PEMBROKE PINES, FL 33028

FEI Number: 42-1579049

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, JOSE C
1820 N. CORPORATE LAKES BLVD.,
SUITE 105
WESTON, FL 33326 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: JOSE C MARRERO

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: CORREA, FERNANDO A
Address: P.O. BOX 297244
City-St-Zip: PEMBROKE PINES, FL 33029

Title: S () Delete
Name: RENDON, PAOLA A
Address: P.O. BOX 297244
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CORREA, FERNANDO A
Address: 14315 NW 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

Title: S (X) Change () Addition
Name: RENDON, PAOLA A
Address: 14315 NW 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAOLA A RENDON

S

09/08/2005

Electronic Signature of Signing Officer or Director

Date