

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000013372

Entity Name: AFRICAN FOOD LAND INC.

FILED
Oct 30, 2008
Secretary of State

Current Principal Place of Business:

1835 N.W. 2ND CT.
MIAMI, FL 33136

New Principal Place of Business:

1843 N.W. 2ND CT.
MIAMI, FL 33136

Current Mailing Address:

1835 N.W. 2ND CT.
MIAMI, FL 33136

New Mailing Address:

1843 N.W. 2ND CT.
MIAMI, FL 33136

FEI Number: 06-1677209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ELZEBIR, AATIF A
1835 N.W. 2ND CT.
MIAMI, FL 33136 US

Name and Address of New Registered Agent:

ELZEBIR, AATIF A
1843 N.W. 2ND CT.
MIAMI, FL 33136 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: AATIF A ELZEBIR

10/30/2008

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: ELZEBIR, AATIF A
Address: 1835 N.W. 2ND CT
City-St-Zip: MIAMI, FL 33136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ELZEBIR, AATIF A
Address: 1843 N.W. 2ND CT
City-St-Zip: MIAMI, FL 33136

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: AATIF A ELZEBIR

P

10/30/2008

Electronic Signature of Signing Officer or Director

Date