## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000015405

Entity Name: NUEVA COCINA FOODS INC.

FILED Dec 04, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2124 NE 123RD STREET 218 NO MIAMI, FL 33181

**New Mailing Address: Current Mailing Address:** 

2124 NE 123RD STREET 2124 NE 123RD STREET STE 218 NO MIAMI, FL 33181 MIAMI, FL 33181

FEI Number: 43-1995829 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MASCARO, CORINA MASCARO, CORINA 45 ANTILLÁ AVE. #3L 2851 NE 183RD STREET 317E CORAL GABLES, FL 33140 US AVENTURA, FLA, FL 33160

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: CORINA MASCARO 12/04/2007

> 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete (X) Change ( ) Addition

MASCARO, CORINA MASCARO, CORINA Name: Name:

2124 NE 1243RD STREET, STE. 218 2124 NE 1243RD STREET, STE. 218 Address: Address:

City-St-Zip: NO MIAMI, FL 33181 City-St-Zip: NORTH MIAMI, FL 33181

( ) Delete Title: PRES Title: (X) Change ( ) Addition

Name: DEARMAS, CELESTE Name: DEARMAS, CELESTE

2124 NE 123RD STREET, STE. 218 2124 NE 123RD STREET, STE. 218 Address: Address: NO MIAMI, FL 33181 NORTH MIAMI, FL 33181 City-St-Zip: City-St-Zip:

Title: Title: CFO () Delete () Change () Addition

LAGOA, MIGDALIA Name: Name: 2124 NE 123RD ST., STE, 218 Address: Address: City-St-Zip: NORTH MIAMI, FL 33181 City-St-Zip:

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: JOANNA RYNNING MRS 12/04/2007

Electronic Signature of Signing Officer or Director

Date