2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000025917

Entity Name: ELIO'S PALM TREE SALES AND NURSERY SERVICES, INC.

FILED Oct 11, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8415 SW 107 AVE #346 MIAMI, FL 33173

Current Mailing Address: New Mailing Address:

8415 SW 107 AVE #346 MIAMI, FL 33173

FEI Number: 06-1682050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAST, LOUIS F
4805 NW 79 AVE.
MIAMI, FL 33166 US

CAST, LOUIS F
4805 NW 79 AVE.
#9
MIAMI, FL 33166 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: LOUIS F. CAST 10/11/2005

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

 Name:
 HERNANDEZ, ELIO
 Name:
 HERNANDEZ, ELIO

 Address:
 17860 SW 107 AVE #5
 Address:
 8415 SW 107 AVE #346

 City-St-Zip:
 MIAMI, FL 33157
 City-St-Zip:
 MIAMI, FL 33173 43

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: ELIO HERNANDEZ P/D 10/11/2005