## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000031885

Entity Name: RZP BLOCK, INC.

FILED Dec 07, 2005 Secretary of State

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

12265 SW 43RD STREET MIAMI, FL 33175

Current Mailing Address: New Mailing Address:

12265 SW 43RD STREET MIAMI, FL 33175

FEI Number: 04-3746245 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:

 SPIEGEL & UTRERA, P.A.
 CARLOS GARCIA, CPA

 1840 SW 22ND ST.
 4995 NW 72 AVENUE

 4TH FLOOR
 SUITE 206

 MIAMI, FL 33145 US
 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: CARLOS GARCIA 12/07/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete Title: P (X) Change ( ) Addition Name: PACHECO, RICARDO Name: PACHECO, RICARDO

 Address:
 12265 SW 43RD STREET
 Address:
 12265 SW 43RD STREET

 City-St-Zip:
 MIAMI, FL 33175
 City-St-Zip:
 MIAMI, FL 33175

Title: D () Delete Title: () Change () Addition

 Name:
 PACHECO, RICARDO
 Name:

 Address:
 12265 SW 43RD STREET
 Address:

 City-St-Zip:
 MIAMI, FL 33175
 City-St-Zip:

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

 Name:
 Name:
 FUENTES, ZAIDA

 Address:
 Address:
 12265 SW 43RD STREET

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33175

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: ZAIDA FUENTES VP 12/07/2005