

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000061983

Entity Name: LLANES BOAT CARE, INC.

FILED  
May 28, 2008  
Secretary of State

## Current Principal Place of Business:

4055 SW 107 PL  
MIAMI, FL 33165

## New Principal Place of Business:

23001 SW 107 AVE  
MIAMI, FL 33170

## Current Mailing Address:

4055 SW 107 PL  
MIAMI, FL 33165

## New Mailing Address:

23001 SW 107 AVE  
MIAMI, FL 33170

FEI Number: 81-0616811

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LLANES, PEDRO S  
4055 SW 107 PL  
MIAMI, FL 33165 US

## Name and Address of New Registered Agent:

LLANES, PEDRO S  
23001 SW 107 AVE  
MIAMI, FL 33170 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: LLANES PEDRO

05/28/2008

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: PD ( ) Delete  
Name: LLANES, PEDRO S  
Address: 4055 SW 107 PL  
City-St-Zip: MIAMI, FL 33165

Title: SD ( ) Delete  
Name: ARMENTEROS, DANORIS  
Address: 4055 SW 107 PL  
City-St-Zip: MIAMI, FL 33165

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: LLANES, PEDRO S  
Address: 23001 SW 107 AVE  
City-St-Zip: MIAMI, FL 33170

Title: SD (X) Change ( ) Addition  
Name: ARMENTEROS, DANORIS  
Address: 23001 SW 107 AVE  
City-St-Zip: MIAMI, FL 33170

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: LLANES PEDRO

P

05/28/2008

Electronic Signature of Signing Officer or Director

Date