

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Mar 17, 2009  
Secretary of State**

DOCUMENT# P03000094134

Entity Name: MJOP BUILDERS CORP

**Current Principal Place of Business:**

8491 NW 17 STREET  
113  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

8491 NW 17 STREET  
113  
MIAMI, FL 33126 US

**New Mailing Address:**

FEI Number: 06-1705253      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PARDO, MARCO A JR  
8491 NW 17 STREET  
113  
MIAMI, FL 33126 US

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

ROMERO, TOMAS E  
8491 NW 17 STREET  
113  
MIAMI, FL 33126 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: TOMAS ROMERO      03/17/2009  
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: PARDO, MARCO A JR  
Address: 8491 NW 17 STREET, SUITE 113  
City-St-Zip: MIAMI, FL 33126 US

Title: D (X) Delete  
Name: CELADA, HERNANDO  
Address: 8491 NW 17 STREET, SUITE 113  
City-St-Zip: MIAMI, FL 33126 US

Title: D (X) Delete  
Name: ROMERO, TOMAS  
Address: 8491 NW 17 STREET, SUITE 113  
City-St-Zip: MIAMI, FL 33126 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ROMERO, TOMAS E  
Address: 8491 NW 17 STREET, SUITE 113  
City-St-Zip: MIAMI, FL 33126 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: TOMAS ROMERO      P      03/17/2009  
Electronic Signature of Signing Officer or Director      Date