

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000101691

Entity Name: TA'FACIL CORPORATION

FILED  
Dec 10, 2009  
Secretary of State

## Current Principal Place of Business:

8570 NW 61 ST  
MIAMI, FL 33166

## New Principal Place of Business:

## Current Mailing Address:

8570 NW 61 ST  
MIAMI, FL 33166

## New Mailing Address:

FEI Number: 41-2110411

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVEL, ANDRES O  
8570 NW 61 ST  
MIAMI, FL 33166 US

## Name and Address of New Registered Agent:

OQUENDO, DANIEL O  
8570 NW 61 ST  
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: DANIEL OQUENDO

12/10/2009

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: PDTS ( ) Delete  
Name: LEVEL, ANDRES O  
Address: 7041 NW 107 COURT  
City-St-Zip: DORAL, FL 33178 US

Title: VD ( ) Delete  
Name: AVELINO, GONCALVES J  
Address: 10749 NW 70 LANE  
City-St-Zip: DORAL, FL 33178 US

Title: D ( ) Delete  
Name: MONTENEGRO, JULIO  
Address: 1314 EAST LAS OLAS BLVD STE 119  
City-St-Zip: FT LAUDERDALE, FL 33301 US

Title: V (X) Delete  
Name: PETCASH, PAMELA S  
Address: 1314 E. LAS OLAS BLVD. #199  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDTS (X) Change ( ) Addition  
Name: OQUENDO, DANIEL  
Address: 10919 NW 65TH STREET  
City-St-Zip: DORAL, FL 33178 US

Title: D (X) Change ( ) Addition  
Name: AVELINO, GONCALVES J  
Address: 10749 NW 70 LANE  
City-St-Zip: DORAL, FL 33178 US

Title: D (X) Change ( ) Addition  
Name: LEVEL, ANDRES  
Address: 10919 NW 65TH STREET  
City-St-Zip: DORAL, FL 33178 US

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: DANIEL OQUENDO

PTSD

12/10/2009

Electronic Signature of Signing Officer or Director

Date