

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000106119

Entity Name: JOHN BUONOCORE, INC.

FILED
Jan 22, 2007
Secretary of State

Current Principal Place of Business:

4633 SW LONG BAY DRIVE
PALM CITY, FL 34990 US

New Principal Place of Business:

Current Mailing Address:

4633 SW LONG BAY DRIVE
PALM CITY, FL 34990

New Mailing Address:

FEI Number: 20-0850227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUONOCORE, JOHN L
4633 SW LONG BAY DRIVE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

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: JOHN BUONOCORE

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: BUONOCORE, JOHN L
Address: 4633 SW LONG BAY DR
City-St-Zip: PALM CITY, FL 34990

Title: VD () Delete
Name: BUONOCORE, ELIZABETH R
Address: 4633 SW LONG BAY DR
City-St-Zip: PALM CITY, FL 34990

Title: SD () Delete
Name: CREAMER, THEODORE T
Address: 436 NW 13TH DR
City-St-Zip: BOCA RATON, FL 33436

Title: T (X) Delete
Name: CREAMER, BARBARA
Address: 436 NW 13TH DR
City-St-Zip: BOCA RATON, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: ELIZABETH BUONOCORE

VD

01/22/2007

Electronic Signature of Signing Officer or Director

Date