

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000107162

Entity Name: LAST FRONTIER REALTY, CORP.

FILED  
Oct 18, 2005  
Secretary of State

## Current Principal Place of Business:

1904 S OCEAN DRIVE APT 804  
HALLANDALE BEACH, FL 33009

## New Principal Place of Business:

1880 S OCEAN DRIVE  
TOWER SUITE 503  
HALLANDALE BEACH, FL 33009

## Current Mailing Address:

1904 S OCEAN DRIVE APT 804  
HALLANDALE BEACH, FL 33009

## New Mailing Address:

1880 S OCEAN DRIVE  
TOWER SUITE 503  
HALLANDALE BEACH, FL 33009

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LASERNA, GUSTAVO  
1904 S OCEAN DRIVE APT 804  
HALLANDALE BEACH, FL 33009 US

## Name and Address of New Registered Agent:

LASERNA, GUSTAVO  
1880 S OCEAN DRIVE  
TOWER SUITE 503  
HALLANDALE BEACH, FL 33009 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: GUSTAVO LASERNA

10/18/2005

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: DPVT ( ) Delete  
Name: LASERNA, GUSTAVO  
Address: 1904 S OCEAN DRIVE APT 804  
City-St-Zip: HALLANDALE BEACH, FL 33009

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVT (X) Change ( ) Addition  
Name: LASERNA, GUSTAVO  
Address: 1880 S OCEAN DRIVE APT TS. 503  
City-St-Zip: HALLANDALE BEACH, FL 33009

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: GUSTAVO LASERNA

DPVT

10/18/2005

Electronic Signature of Signing Officer or Director

Date