

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000111480

Entity Name: MERI GOLD INVESTMENTS INC.

FILED
Oct 05, 2009
Secretary of State

Current Principal Place of Business:

111333 COBBLE FIELD RD
WELLINGTON, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

111333 COBBLE FIELD RD
WELLINGTON, FL 33467 US

New Mailing Address:

FEI Number: 56-2403051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMAS, JOSE CPA
11133 COBBLE FIELD RD
WELLINGTON, FL 33467 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: JOSE THOMAS

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: PAILEY, JOLLY
Address: 11133 COBBLE FIELD RD
City-St-Zip: WELLINGTON, FL 33467 US

Title: VP () Delete
Name: CHAKKAPPAN, JOY
Address: 118 DAVIS DRIVE
City-St-Zip: RIVER EDGE, NJ 07666 US

Title: T () Delete
Name: ALOOKKARAN, JOY
Address: 2032 WEST FIELD AVENUE
City-St-Zip: SCOTCH PLAINS, NJ 07076 US

Title: D () Delete
Name: JOSEPH, JOMY
Address: 548 PRINCETON ST.
City-St-Zip: NEW MILFORD, NJ 07046 US

Title: D () Delete
Name: PALATY, GEORGE
Address: 9 MOOSE LANE
City-St-Zip: BURGEN FIELD, NJ 07621 US

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:

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: JOLLY PAILEY

P

10/05/2009

Electronic Signature of Signing Officer or Director

Date