

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000123536

1. Entity Name
PRINTFACTORYONLINE INC.



Principal Place of Business
5800 HOLLYWOOD BLVD.
STORE 8103
HOLLYWOOD, FL 33021

Mailing Address
5800 HOLLYWOOD BLVD.
STORE 8103
HOLLYWOOD, FL 33021

2. Principal Place of Business
8826 West Flagler St

3. Mailing Address
8826 West Flagler St

Suite, Apt. #, etc.,
224

Suite, Apt. #, etc.,
224

City & State
Miami, FLORIDA

City & State
Miami, FLORIDA

Zip
33174

Country
Dade

Zip
33174

Country
Dade

12282004 REIN-P CR2E098 (6/04)

4. FEI Number
03-0415016

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ESCUDERO, ISABEL C
13648 SW 119 AVE.
MIAMI, FL 33186

7. Name and Address of New Registered Agent

Name
ESCUDERO, ISABEL C.
Street Address (P.O. Box Number is Not Acceptable)
438 SW 100th Ave
Port St. Lucie
City
Port St. Lucie FL Zip Code
34983

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: ISABEL C. ESCUDERO

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12-27-04

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ESCUDERO, ISABEL C
5800 HOLLYWOOD BLVD. STORE 8103
HOLLYWOOD, FL 33021 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
LOPEZ, JAIRO A
5800 HOLLYWOOD BLVD. STORE 8103
HOLLYWOOD, FL 33021 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ESCUDERO, ISABEL C
8826 W. Flagler St # 224
Miami, FL 33174 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
LOPEZ, JAIRO A.
8826 W. Flagler St. # 224
Miami, FL, 33174 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400043706884 ☐ Change ☐ Addition
12/29/04--01040--006 **158.75

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ISABEL C. ESCUDERO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-27-04 305 9756606

Date

Daytime Phone #