## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000123945

Entity Name: SUNSHINE MARINE AND MOVERS OF S. FL INC.

FILED Feb 23, 2009 Secretary of State

Current Pi	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
	STIC POINTE D	)R			
#1903 AVENTURA, FL 33180 US		US			
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
19101 MYSTIC POINTE DR #1903			PO BOX 452829 SUNRISE, FL 33345	US	
AVENTUR.	A, FL 33180	US			
FEI Number:	65-1137771	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
#1903	MRI BTIC POINTE D A, FL 33180 L	•			
The above in the State		ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: OMRIBLO	OCH			
Electronic Signature of Registered Agent			ent	Date	
		(2)(b), F.S., the corporation did n Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BLOCH, OMRI	Delete POINTE DR #1903 33180	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: OMRI BLOCH P 02/23/2009