

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000125088

Entity Name: FP COLLINS, CORP.

FILED  
Nov 01, 2004  
Secretary of State

## Current Principal Place of Business:

5161 COLLINS AVENUE  
#1602  
MIAMI BEACH, FL 33140 US

## New Principal Place of Business:

1601 COLLINS AVENUE  
MIAMI BEACH, FL 33139 US

## Current Mailing Address:

5161 COLLINS AVENUE  
#1602  
MIAMI BEACH, FL 33140 US

## New Mailing Address:

1601 COLLINS AVENUE  
MIAMI BEACH, FL 33139 US

FEI Number: 20-0360433

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ANDRE, PASCAL  
5161 COLLINS AVENUE  
#1602  
MIAMI BEACH, FL 33140 US

## Name and Address of New Registered Agent:

CHAUVINC, JACQUES  
1450 LINCOLN ROAD  
#303  
MIAMI BEACH, FL 33139 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: JACQUES CHAUVINC

11/01/2004

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: CHAUVINC, JACQUES  
Address: 5161 COLLINS AVENUE, #1602  
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: VPD ( ) Delete  
Name: ANDRE, PASCAL  
Address: 5161 COLLINS AVENUE, #1602  
City-St-Zip: MIAMI BEACH, FL 33140 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CHAUVINC, JACQUES  
Address: 1450 LINCOLN ROAD #303  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VPD (X) Change ( ) Addition  
Name: ANDRE, PASCAL  
Address: 1200 WEST AVENUE #1117  
City-St-Zip: MIAMI BEACH, FL 33139 US

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: JACQUES CHAUVINC

PD

11/01/2004

Electronic Signature of Signing Officer or Director

Date