

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000149698

FILED
Oct 06, 2005
Secretary of State

Entity Name: WALFRIDO PERA'S CORPORATION

Current Principal Place of Business:

6115 SELLINGER LN
ORLANDO, FL 32808 US

New Principal Place of Business:

PO BOX 682866
ORLANDO, FL 32808 US

Current Mailing Address:

PO BOX 682866
ORLANDO, FL 32868 US

New Mailing Address:

FEI Number: 20-0481740 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PERA, WALFRIDO
6115 SELLINGER LN
ORLANDO, FL 32808 US

Name and Address of New Registered Agent:

PERA, WALFRIDO
7810 SKYVIEW DR.
ORLANDO, FL 32809 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: WALFRIDO PERA

10/06/2005

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: P () Delete
Name: PERA, WALFRIDO
Address: 6115 SELLINGER LN
City-St-Zip: ORLANDO, FL 32808 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PERA, WALFRIDO
Address: 7810 SKYVIEW DR.
City-St-Zip: ORLANDO, FL 32809 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: PERA WALFRIDO

P

10/06/2005

Electronic Signature of Signing Officer or Director

Date