

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000154669

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: 1129 N.W. 3RD STREET HOLDINGS CORP.

**Current Principal Place of Business:**

740 MENDOZA AVE.  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

240 MONDOZA AVE  
CORAL GABLES, FL 33134

**New Mailing Address:**

740 MENDOZA AVE.  
CORAL GABLES, FL 33134

FEI Number: 54-2136938

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LOGUE, PHILIP  
8603 S DIXIE HWY STE 409  
MIAMI, FL 33143 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: PHILIP LOGUE

\_\_\_\_\_  
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: D ( ) Delete  
Name: LOGUE, PHILIP  
Address: 8603 S DIXIE HWY STE 409  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: LOGUE, TERESA  
Address: 8603 S DIXIE HWY STE 409  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: TAQUECHEL, AMARO  
Address: 740 MENDOZA AVE  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: TAQUECHEL, JULIA  
Address: 740 MENDOZA AVE  
City-St-Zip: CORAL GABLES, FL 33134

**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:

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: PHILIP LOGUE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PRES

01/14/2008

\_\_\_\_\_  
Date