## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000142240

**Entity Name:** DOLPHIN GRAPHIX INCORPORATED

FILED Sep 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10371 S.W. 150TH PLACE 2525 NW 74TH AVENUE SUITE 5205 MIAMI, FL 33122 US MIAMI, FL 33196 US

Current Mailing Address: New Mailing Address:

10371 S.W. 150TH PLACE 2525 NW 74TH AVENUE SUITE 5205 MIAMI, FL 33122 US MIAMI, FL 33196 US

FEI Number: 47-0946091 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BATRES, EDUARDO J
10371 S.W. 150TH PLACE
SUITE 5205
MIAMI, FL 33196 US

BATRES, EDUARDO J
2525 NW 74TH AVENUE
MIAMI, FL 33122 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: EDUARDO BATRES 09/19/2006

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 BATRES, EDUARDO J
 Name:
 BATRES, EDUARDO J

 Address:
 10371 S.W. 150TH PLACE, SUITE 5205
 Address:
 2525 NW 74TH AVENUE

 City-St-Zip:
 MIAMI, FL 33196 US
 City-St-Zip:
 MIAMI, FL 33122 US

 Title:
 S
 () Delete
 Title:
 S
 (X) Change () Addition

 Name:
 SENOFONTE, CELESTE C
 Name:
 SENOFONTE-BATRES, CELESTE C

 Address:
 10371 S.W. 150TH PLACE, SUITE 5205
 Address:
 2525 NW 74TH AVENUE

 City-St-Zip:
 MIAMI, FL 33196 US
 City-St-Zip:
 MIAMI, FL 33122 US

 Name:
 SENOFONTE, CELESTE C
 Name:
 BATRES, HIMARA

 Address:
 10371 S.W. 150TH PLACE, SUITE 5205
 Address:
 2525 NW 74TH AVENUE

 City-St-Zip:
 MIAMI, FL 33196 US
 City-St-Zip:
 MIAMI, FL 33122 US

I hereby certify that the information supplied with this filing does not qualify for the 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: EDUARDO J. BATRES P 09/19/2006