

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000143855

Entity Name: N GROUP ENTERPRISES, INC.

FILED  
Apr 26, 2009  
Secretary of State

**Current Principal Place of Business:**

7435 NORTH OAKMONT DRIVE  
MIAMI, FL 33015 US

**New Principal Place of Business:**

**Current Mailing Address:**

7435 NORTH OAKMONT DRIVE  
MIAMI, FL 33015 US

**New Mailing Address:**

FEI Number: 11-3729544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NUNEZ, AMY  
7435 NORTH OAKMONT DRIVE  
MIAMI, FL 33015 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: AMY NUNEZ

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: NUNEZ, AMY  
Address: 7435 NORTH OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015 US

Title: SD ( ) Delete  
Name: NUNEZ, JESSICA  
Address: 7435 NORTH OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015 US

Title: TD ( ) Delete  
Name: NUNEZ, HILDA  
Address: 7435 NORTH OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015 US

Title: VPD ( ) Delete  
Name: NUNEZ, RIGOBERTO  
Address: 7435 NORTH OAKMONT DRIVE  
City-St-Zip: MIAMI, FL 33015

**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: AMY NUNEZ

PD

04/26/2009

Electronic Signature of Signing Officer or Director

Date