## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000025038

**Entity Name:** ARLETTE B. TEJEDA P.A.

FILED Nov 24, 2006 Secretary of State

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

4805 NW 79TH AVENUE # 9 P.O. BOX 650983 DORAL, FL 33166 P.O. BOX 650983

Current Mailing Address: New Mailing Address:

4805 NW 79TH AVENUE # 9 P.O BOX 650983 DORAL, FL 33166 MIAMI, FL 33265

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

CAST, LOUIS F TEJEDA, ARLETTE
4805 NW 79TH AVENUE # 9 2530 SW 87 AVENUE
DORAL, FL 33166 US MIAMI, FL 33165 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: ARLETTE TEJEDA 11/24/2006

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:

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

 Name:
 TEJEDA, ARLETTE B
 Name:
 TEJEDA, ARLETTE

 Address:
 4805 NW 79TH AVENUE # 9
 Address:
 P.O BOX 650983

City-St-Zip: DORAL, FL 33166 City-St-Zip: MIAMI, FL 33265

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: TEJEDA, ARLETTE B Name: TEJEDA, ARLETTE

Address: 4805 NW 79TH AVENUE # 9 Address: P.O. BOX 650983
City-St-Zip: DORAL, FL 33166 City-St-Zip: MIAMI, FL 33265

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: ARLETTE TEJEDA PVST 11/24/2006