


2006 FOR PROFIT CORPORATION REINSTATEMENT

112

DOCUMENT # P05000032040

1. Entity Name
OCO CONNECT, INC.



FILED

2006 OCT -9 AM 10:02

Principal Place of Business
P O BOX 644
DANIA, FL 33004 US } *change*

Mailing Address
P O BOX 644
DANIA, FL 33004 US

05/11/2006
DALE HASSER, FLORIDA
030 150.00

2. Principal Place of Business
6111 WASHINGTON ST
Suite, Apt. #, etc.
STE 102
City & State
HOLLYWOOD, FL
Zip
33023
Country
U.S.A.

3. Mailing Address
Suite, Apt. #, etc.
City & State
City
Zip
Country

10042006 REIN-P CR2E098 (11/05)

4. FEI Number
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
RIVERA, CEREDUAL
700 NW 214 ST
#104
MIAMI, FL 33169 } *CHANGE*

7. Name and Address of New Registered Agent
Name
RIVERA, CEREDUAL
Street Address (P.O. Box Number is Not Acceptable)
6111 WASHINGTON ST # 102
City
HOLLYWOOD
FL Zip Code
33023

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* DATE 10/4/06

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$750.00
After January 1, 2007, Fee will be \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RIVERA, CEREDUAL 6111 WASHINGTON ST., APT. 102 HOLLYWOOD, FL 33023 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE 10/4/06 DAYTIME PHONE # 305-525-5261

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/11

2/2

October 4, 2006

To:
Division of Corporations

Ref: **OCOA CONNECT, INC**
Document Number: **P05000032040**


By this letter I am please requesting the reinstatement of my corporation because I sent my annual report on time. I mailed my annual report on April 15, 2006 and the check was cashed on May 25 (check number 1044).

In my conversation held today with a Division of corporation officer she told me that they sent me a rejection letter which I never received.

Enclosed please find the reinstatement form with the address change.

If you need further information do not hesitate to contact me at the below address.

Sincerely,


Ceredual Rivera

6111 Washington Street Apt 102
Hollywood, FL 33023

PD: I am sending the reinstatement form because I could not find a annual report form.