

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000044177

Entity Name: FLORIDA BCS, INC

FILED
Apr 09, 2007
Secretary of State

Current Principal Place of Business:

5550 JONQUIL LANE
307
NAPLES, FL 34109

New Principal Place of Business:

702 NW 16TH PLACE
CAPE CORAL, FL 33993

Current Mailing Address:

5550 JONQUIL LANE
307
NAPLES, FL 34109

New Mailing Address:

702 NW 16TH PLACE
CAPE CORAL, FL 33993

FEI Number: 20-2521198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORTES, LUIS
5550 JONQUIL LANE
307
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

CORTES, LUIS
702 NW 16TH PLACE
CAPE CORAL, FL 33993 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: LUIS CORTES

04/09/2007

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: P () Delete
Name: CORTES, LUIS
Address: 5550 JONQUIL LANE
City-St-Zip: NAPLES, FL 34109 US

Title: SEC () Delete
Name: CUERVO, CARLOTA
Address: 5550 JONQUIL LANE
City-St-Zip: NAPLES, FL 34109 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CORTES, LUIS
Address: 702 NW 16TH PLACE
City-St-Zip: CAPE CORAL, FL 33993 US

Title: SEC (X) Change () Addition
Name: CUERVO, CARLOTA
Address: 702 NW 16TH PLCE
City-St-Zip: CAPE CORAL, FL 33993 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: LUIS CORTES

P

04/09/2007

Electronic Signature of Signing Officer or Director

Date