

2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED

08 JAN 18 PM 2:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000065330	
1. Entity Name MARIN SALCEDO ENTERPRISES, INC.	



Principal Place of Business 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212	Mailing Address 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212
--	--

2. Principal Place of Business - No P.O. Box # 16311 MALIBU DRIVE	3. Mailing Address 16311 MALIBU DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.



01152008 REIN-P CR2E098 (1/07)

City & State WESTON FL	City & State WESTON FL
Zip 33326	Zip 33326
Country US	Country US

4. FEI Number 20-2984149	Applied For <input type="checkbox"/> Not Applicable
-----------------------------	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--------------------------------

6. Name and Address of Current Registered Agent MARIN, ALBERTO 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
--	--

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: (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
-----------------------------	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARIN, ALBERTO 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300115515013 01/18/08--01025--004 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SALCEDO, TERESITA 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 300115515013 01/18/08--01025--005 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARIN SALCEDO, LUCAS 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition REINSTATEMENT 07-08 ^{KS}
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARIN SALCEDO, MANUELA 7832 HAVEN HARBOUR WAY BRADENTON, FL 34212 <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
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 another like empowered.

SIGNATURE: ALBERTO MARIN 1/16/08 (941) 78-4100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #