# 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000083206

Entity Name: HARDSTREET, INC

FILED May 08, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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266 PENNCULAR STREET 7603 FORT DESOTO ST 803 APT # 1005

HAINES CITY, FL 33844 ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

P 0 BOX 2825 7603 FORT DESOTO ST HAINES CITY, FL 33845 APT # 1005

ORLANDO, FL 32822

FEI Number: 20-2968420 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

 SANTO, JOSE
 SANTO, JOSE

 266 PENNCULAR STREET
 7603 FORT DESOTO ST

 APT # 803
 APT # 1005

 HAINES CITY, FL 33844 US
 ORLANDO, FL 32822 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: JOSE SANTO 05/08/2007

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:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: SANTO, JOSE Name: SANTO, JOSE

Address: 266 PENNCULAR STREET APT 803 Address: 7603 FORT DESOTO STREET APT 1005

City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: ORLANDO, FL 32822

Name: SANTO, BRENDALY Name: SANCHEZ, DORIS

Address: 266 PENNCULAR STREET APT 803 Address: 7603 FORT DESOTO STREET APT 1005

City-St-Zip: HAINES CITY, FL 33844 City-St-Zip: ORLANDO, FL 32822

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

Name: SANCHEZ, ISMAEL

Address: Address: 7603 FORT DESOTO STREET APT 1005

City-St-Zip: City-St-Zip: ORLANDO, FL 32822

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

Name: Name: SANCHEZ, IVELISE

Address: Address: 7603 FORT DESOTO STREET APT 1005

City-St-Zip: City-St-Zip: ORLANDO, FL 32822

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: IVELISE SANCHEZ D 05/08/2007