

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000086277

FILED  
Nov 23, 2009  
Secretary of State

**Entity Name:** THE TWIN'S HEAVY EQUIPMENT, CORP.

**Current Principal Place of Business:**

13410 SW 66 ST  
MIAMI, FL 33183

**New Principal Place of Business:**

6267 SW 135TH AVENUE  
MIAMI, FL 33183

**Current Mailing Address:**

13410 SW 66 ST  
MIAMI, FL 33183

**New Mailing Address:**

6267 SW 135TH AVENUE  
MIAMI, FL 33183

**FEI Number:** 20-3004241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEDINA, HERNAN  
13410 SW 66 ST  
MIAMI, FL 33183 US

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

MEDINA, HERNAN  
6267 SW 135TH AVENUE  
MIAMI, FL 33183 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: HERNAN MEDINA

11/23/2009

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: MEDINA, HERNAN  
Address: 6267 SW 135 AVENUE  
City-St-Zip: MIAMI, FL 33183

Title: V (X) Delete  
Name: MEDINA, ERNESTO  
Address: 6267 SW 135 AVENUE  
City-St-Zip: MIAMI, FL 33183

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HERNAN MEDINA

P

11/23/2009

Electronic Signature of Signing Officer or Director

Date