

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P05000091495

Entity Name: EUGENE ROSE INC.

**FILED**  
**Oct 23, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

13499 BISCAYNE BLVD #1209  
NORTH MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

13499 BISCAYNE BLVD #1209  
NORTH MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 54-0549090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INIJE, CHARLES  
06499 NE 19TH AVE.  
#213A  
NORTH MIAMI BEACH, FL 33162 US

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

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: CHARLES INJUE

\_\_\_\_\_  
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: DONALDSON, OWEN  
Address: 13499 BISCAYNE BLVD #1209  
City-St-Zip: NORTH MIAMI, FL 33131

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

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: OWEN DONALDSON

P

10/23/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date