

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000093692

Entity Name: UNION OF TEN, INC.

FILED
Dec 14, 2007
Secretary of State

Current Principal Place of Business:

1004 LONG ISLAND AVE
FT LADERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

1004 LONG ISLAND AVE
FT LADERDALE, FL 33312

New Mailing Address:

FEI Number: 20-3090301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESHOMMES, JONAS
1004 LONG ISLAND AVE
FT LAUDERDALE, FL 33312 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: DESHOMMES JONAS

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,D () Delete
Name: DESHOMMES, JONAS
Address: 1004 LONG ISLAND AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: VTD () Delete
Name: RABOUIN, LOUINER
Address: 17 NW 42ND TERR
City-St-Zip: PLANTATION, FL 33317

Title: D,S (X) Delete
Name: GASTON, LUCRECE
Address: 17 NW 42ND TERR
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: DESHOMMES, GUERSON
Address: 640 CAROLINA AVE
City-St-Zip: FT LAUDERDALE, FL 33312

Title: D () Delete
Name: JEAN-PIERRE, HAROLD
Address: 6220 SW 8TH PLACE
City-St-Zip: NORTH LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JONAS DESHMOMMES

P

12/14/2007

Electronic Signature of Signing Officer or Director

Date