## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000097433

Entity Name: BLAK OKE ENTERPRISES INC.

FILED Oct 07, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

850 NORTH MIAMI AVE 2331 NW 119TH STREET #W310 BLDG 3 SUITE 303 MIAMI, FL 33136 MIAMI, FL 33167

Current Mailing Address: New Mailing Address:

850 NORTH MIAMI AVE 2331 NW 119TH STREET #W310 BLDG 3 SUITE 303 MIAMI, FL 33136 MIAMI, FL 33167

FEI Number: 14-1876697 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:

TAYLOR, MAUREEN E 1016 NW 43RD STREET MIAMI, FL 33127 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: MAUREEN TAYLOR

In accordance with c. 607 103(2)(h). E.S. the corneration did not receive the prior notice

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: P ( ) Delete Title: P (X) Change ( ) Addition
Name: TAYLOR, JAMAL L Name: TAYLOR, JAMAL L

 Address:
 850 NORTH MIAI AVENUE W310
 Address:
 2331 NW 119TH STREET

 City-St-Zip:
 MIAMI, FL 33136
 City-St-Zip:
 MIAMI, FL 33167

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

 Name:
 LYLES, AARON
 Name:
 LYLES, AARON

 Address:
 850 NORTH MIAMI AVE W310
 Address:
 2331 NW 119TH STREET

City-St-Zip: MIAMI, FL 33136 City-St-Zip: MIAMI, FL 33167

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

 Name:
 Name:
 MONTALVAN, RICHARD

 Address:
 Address:
 2331 NW 119TH STREET

 City-St-Zip:
 City-St-Zip:
 MIAMI, FL 33167

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: JAMAL TAYLOR P 10/07/2007