

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000101012

**FILED**  
**Oct 01, 2008**  
**Secretary of State**

**Entity Name:** LAPTOP PARTS AUTHORITY, INC.

**Current Principal Place of Business:**

253 NE 2ND ROAD  
102  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 901056  
HOMESTEAD, FL 33090

**New Mailing Address:**

253 NE 2ND ROAD  
102  
HOMESTEAD, FL 33030

**FEI Number:** 71-0989089

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOLINA, DANNY D  
10835 SW 152 TERR  
MIAMI, FL 33157 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: DANNY MOLINA

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: D ( ) Delete  
Name: MOLINA, DANNY D  
Address: 10835 SW 152 TERR  
City-St-Zip: MIAMI, FL 33157

Title: P ( ) Delete  
Name: HARRIEL, JOHN  
Address: 670 NE 21 TERR  
City-St-Zip: HOMESTEAD, FL 33033

Title: T (X) Delete  
Name: MALDONADO, FELIPE A  
Address: 12472 SW 196 TERR  
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete  
Name: MALDONADO, ELVIS R  
Address: 978 NE 36TH AVE  
City-St-Zip: HOMESTEAD, FL 33033

**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:

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: DANNY MOLINA

D

10/01/2008

Electronic Signature of Signing Officer or Director

Date