## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000114804

Entity Name: THE MARTINEZ FAMILY OF TAMPA CORPORATION

FILED Nov 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9132 BELL ROCK PLACE 6802 W COMANCHE AVE LAND 'O LAKES, FL 34638 US TAMPA, FL 33634 US

Current Mailing Address: New Mailing Address:

9132 BELL ROCK PLACE 6802 W COMANCHE AVE LAND 'O LAKES, FL 34638 US TAMPA, FL 33634 US

FEI Number: 20-3330117 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MARTINEZ, JASON A
9132 BELL ROCK PLACE
LAND O'LAKES, FL 34638 US

MARTINEZ, JASON A
6802 W COMANCHE AVE
TAMPA, FL 33624 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: JASON MARTINEZ 11/08/2007

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MARTINEZ, JASON A
 Name:
 MARTINEZ, JASON A

 Address:
 9132 BELL ROCK PLACE
 Address:
 6802 W COMANCHE AVE

 City-St-Zip:
 LAND 'O LAKES, FL 34638 US
 City-St-Zip:
 TAMPA, FL 33634 US

Title: VP (X) Delete Title: ( ) Change ( ) Addition Name: MARTINEZ, JONATHAN A Name:

Address: 9129 BELL ROCK PLACE Address: City-St-Zip: LAND 'O LAKES, FL 34638 US City-St-Zip:

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

 Name:
 MARTINEZ, EDITH B
 Name:
 MARTINEZ, EDITH B

 Address:
 9132 BELL ROCK PLACE
 Address:
 6802 W COMANCHE AVE

 City-St-Zip:
 LAND 'O LAKES, FL 34638 US
 City-St-Zip:
 TAMPA, FL 33634 US

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: JASON MARTINEZ PRES 11/08/2007