

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000135338

1. Entity Name
CELL INVESTMENT, CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 FEB 20 PM 1:36

Principal Place of Business
712 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33486

Mailing Address
712 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33486



02192007 REIN-P CR2E098 (1/07)

4. FEI Number Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLMENARES, OSCAR
712 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33486

7. Name and Address of New Registered Agent

Name
Jacqueline Hernandez
Street Address (P.O. Box Number is Not Acceptable)
712 West Palmetto Rd
City *Boca Raton* FL Zip Code *33486*

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE *Jacqueline Hernandez*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D COLMENARES, OSCAR ☒ Delete
712 WEST PALMETTO PARK ROAD
BOCA RATON, FL 33486

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
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TITLE
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TITLE
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CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
P Jacqueline Hernandez
712 WEST PALMETTO RD
BOCA RATON 33486

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
600089580476
*02/27/07--01017--012 **300.00*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE: *Jacqueline Hernandez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #