

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000136318

Entity Name: REYES MEDICAL, INC.

FILED  
May 22, 2008  
Secretary of State

## Current Principal Place of Business:

175 FONTAINEBLEAU BLVD. 1 G 3  
MIAMI, FL 33172

## New Principal Place of Business:

15532 SW 95 LN  
MIAMI, FL 33196

## Current Mailing Address:

175 FONTAINEBLEAU BLVD. 1 G 3  
MIAMI, FL 33172

## New Mailing Address:

15532 SW 95 LN  
MIAMI, FL 33196

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASAS, JOSE  
175 FONTAINEBLEAU BLVD 1 G 3  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

CABRERA, LAZARO  
15532 SW 95 LN  
MIAMI, FL 33196 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: LAZARO CABRERA

05/22/2008

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: PD ( ) Delete  
Name: CASAS, JOSE  
Address: 175 FONTAINEBLEAU BLVD. 1 G 3  
City-St-Zip: MIAMI, FL 33172

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: CABRERA, LAZARO  
Address: 15532 SW 95 LN  
City-St-Zip: MIAMI, FL 33196

Title: V/D ( ) Change (X) Addition  
Name: PEREZ, JUAN B  
Address: 2120 SW 76 AVENUE  
City-St-Zip: MIAMI, FL 33155

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: LAZARO CABRERA

PSD

05/22/2008

Electronic Signature of Signing Officer or Director

Date