

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000143125

Entity Name: SYNTO OCEAN 1504 CORP.

FILED
Oct 08, 2009
Secretary of State

Current Principal Place of Business:

1500 SAN REMO AVE
STE 248
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

1500 SAN REMO AVE
STE 248
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 26-1298195 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BARED ANS ASSOC. P.A. .
1500 SAN REMO AVE
STE 248
CORAL GABLES, FL 33146 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: P BARED

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: PEREZ, ARTURO V
Address: 1500 SAN REMO AVE 3 248
City-St-Zip: CORAL GABLES, FL 33146

Title: D () Delete
Name: GARZA, PAULINE
Address: 1500 SAN REMO AVE # 248
City-St-Zip: CORAL GABLES, FL 33146

Title: D (X) Delete
Name: GARZA, ARTURO
Address: 1500 SAN REMO AVE # 248
City-St-Zip: MIAMI, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P (X) Change () Addition
Name: GARZA, ARTURO
Address: 1500 SAN REMO AVE 3 248
City-St-Zip: CORAL GABLES, FL 33146

Title: D/S (X) Change () Addition
Name: GARZA, PAULINA
Address: 1500 SAN REMO AVE # 248
City-St-Zip: CORAL GABLES, FL 33146

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: P GARZA

S

10/08/2009

Electronic Signature of Signing Officer or Director

Date