

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000152268

Entity Name: KADOSHI AUTO CLINIC, CORP.

FILED  
Oct 16, 2009  
Secretary of State

## Current Principal Place of Business:

350 E 85TH STREET  
SUITE 3  
MIAMI, FL 33141

## New Principal Place of Business:

350 E 85TH STREET  
SUITE 2  
MIAMI, FL 33141

## Current Mailing Address:

350 E 85TH STREET  
SUITE 3  
MIAMI, FL 33141

## New Mailing Address:

350 E 85TH STREET  
SUITE 2  
MIAMI, FL 33141

FEI Number: 20-3798026

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVERIO DA SILVA, MARCIEL  
350 E 85TH STREET  
SUITE 3  
MIAMI, FL 33141 US

## Name and Address of New Registered Agent:

SILVERIO DA SILVA, MARCIEL  
350 E 85TH STREET  
SUITE 2  
MIAMI, FL 33141 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: MARCIEL SILVERIO DA SILVA

10/16/2009

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: SILVERIO DA SILVA, MARCIEL  
Address: 350 E 85TH STREET SUITE 3  
City-St-Zip: MIAMI, FL 33141

Title: VD ( ) Delete  
Name: PICCININI, WANDERVEX  
Address: 350 E 85TH STREET SUITE 3  
City-St-Zip: MIAMI, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SILVERIO DA SILVA, MARCIEL  
Address: 350 E 85TH STREET SUITE 2  
City-St-Zip: MIAMI, FL 33141

Title: VD (X) Change ( ) Addition  
Name: PICCININI, WANDERVEX  
Address: 350 E 85TH STREET SUITE 2  
City-St-Zip: MIAMI, FL 33141

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: MARCIEL SILVERIO DA SILVA

PD

10/16/2009

Electronic Signature of Signing Officer or Director

Date