

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000154174

**FILED**  
**May 04, 2009**  
**Secretary of State**

**Entity Name:** DJ MIXMASTER & PARTY RENTAL INC.

**Current Principal Place of Business:**

16679 SW 117 AVE  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

16679 SW 117 AVE  
MIAMI, FL 33177

**New Mailing Address:**

P.O. BOX 940744  
MIAMI, FL 33194

**FEI Number:** 20-3837088

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PINEDA, LEONARDO A  
16679 SW 117 AVE  
MIAMI, FL 33177 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: LEONARDO PINEDA

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: DP ( ) Delete  
Name: PINEDA, LEONARDO A  
Address: 14386 SW 36 ST  
City-St-Zip: MIAMI, FL 33175

Title: DV ( ) Delete  
Name: ORTEGA, MAYLEN  
Address: 14386 SW 36 ST  
City-St-Zip: MIAMI, FL 33175

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PINEDA, LEONARDO A  
Address: 14386 SW 36 ST  
City-St-Zip: MIAMI, FL 33175

Title: VP (X) Change ( ) Addition  
Name: ORTEGA, MAYLEN  
Address: 14386 SW 36 ST  
City-St-Zip: MIAMI, FL 33175

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: MAYLEN PINEDA

VP

05/04/2009

Electronic Signature of Signing Officer or Director

Date