

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000158622

Entity Name: LAJOPEZ, INC.

FILED
Sep 28, 2006
Secretary of State

Current Principal Place of Business:

7240 NW 11 CT
PLANTATION, FL 33313

New Principal Place of Business:

1800 W 49 STREET
SUITE 321
HIALEAH, FL 33012

Current Mailing Address:

7240 NW 11 CT
PLANTATION, FL 33313

New Mailing Address:

1800 W 49 STREET
321
HIALEAH, FL 33012

FEI Number: 20-3964068

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSAPHAT, JOCELYNE
14346 SW 92ND TERRACE
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

JOSAPHAT, JOCELYNE P
1800 W 49 STREET
SUITE 321
HIALEAH, FL 33012 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: JOSAPHAT JOCELYNE

09/28/2006

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: P () Delete
Name: JOSAPHAT, JOCEZYNE
Address: 14346 SW 92ND TERRACE
City-St-Zip: MIAMI, FL 33186

Title: VP () Delete
Name: PEREZ, RAMONA
Address: 7240 NW 11 CT
City-St-Zip: PLANTATION, FL 33313

Title: S () Delete
Name: LALANNE, ROMIE
Address: 11000 SW 134 TERRACE
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JOSAPHAT, JOCELYNE D
Address: 1800 WEST 49 STREET SUITE 321
City-St-Zip: HIALEAH, FL 33012

Title: VP (X) Change () Addition
Name: PEREZ, RAMONA
Address: 1800 W 49 STREET SUITE 321
City-St-Zip: HIALEAH, FL 33012

Title: S (X) Change () Addition
Name: LALANNE, ROMIE
Address: 1800 W 49 STREET SUITE 321
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the 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: RAMONA PEREZ

V

09/28/2006

Electronic Signature of Signing Officer or Director

Date