## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000158682

**Entity Name:** MARALEX INVESTMENTS, INC.

FILED Nov 09, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

717 PONCE DE LEON BOULEVARD, SUITE 234 777 BRICKELL AVENUE CORAL GABLES, FL 33134

SUITE 1010 MIAMI, FL 33131

**Current Mailing Address: New Mailing Address:** 

777 BRICKELL AVENUE 717 PONCE DE LEON BOULEVARD, SUITE 234 CORAL GABLES, FL 33134

SUITE 1010 MIAMI, FL 33131

FEI Number: 20-3929242 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FABRE, FRANK R HENRIQUEZ, MARIO E 717 PONCE DE LEON BOULEVARD, SUITE 234 777 BRICKELL AVENUE

CORAL GABLES, FL 33134 1010 MIAMI, FL 33131 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: MARIO HENRIQUEZ 11/09/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

HENRIQUEZ, MARIO HENRIQUEZ, MARIO Name: Name: 777 BRICKELL AVE., SUITE 1390 777 BRICKELL AVE., SUITE 1010 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

DT Title: (X) Change ( ) Addition Title: () Delete

HENRIQUEZ, MARISOL D Name: Name: HENRIQUEZ, MARISOL D 777 BRICKELL AVE., SUITE 1390 777 BRICKELL AVE., SUITE 1010 Address: Address:

MIAMI, FL 33131 MIAMI, FL 33131 City-St-Zip: City-St-Zip:

Title: Title: SD ( ) Delete SD (X) Change ( ) Addition

FABRE, FRANK R FABRE, FRANK R Name: Name:

717 PONCE DE LEON BOULEVARD, SUITE 234 2310 COUNTRY CLUB PRADO Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: MARIO HENRIQUEZ **PRES** 11/09/2007