

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000006339

Entity Name: MOJICA UNLIMITED INC

FILED
Feb 19, 2008
Secretary of State

Current Principal Place of Business:

7807 RIFFLE LANE
ORLANDO, FL 32818 US

New Principal Place of Business:

823 KAZAROS CIRCLE
OCOEE, FL 34761 US

Current Mailing Address:

7807 RIFFLE LANE
ORLANDO, FL 32818 US

New Mailing Address:

823 KAZAROS CIRCLE
OCOEE, FL 34761 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOJICA, JUAN D
7807 RIFFLE LANE
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

MOJICA, JUAN D
823 KAZAROS CIRCLE
OCOEE, FL 34761 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: JUAN MOJICA

02/19/2008

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: MOJICA, JUAN D
Address: 7807 RIFFLE LANE
City-St-Zip: ORLANDO, FL 32818 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOJICA, JUAN D
Address: 823 KAZAROS CIRCLE
City-St-Zip: OCOEE, FL 34761 US

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: JUAN MOJICA

PRES

02/19/2008

Electronic Signature of Signing Officer or Director

Date