

2007 FOR PROFIT CORPORATION REINSTATEMENT

10fz

DOCUMENT # P06000014055

1. Entity Name
D'CABALLEROS BARBER SHOP GROUP, INC.



FILED

07 OCT 31 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10152007 REIN-P CR2E098 (1/07) 107
REINSTATEMENT

Principal Place of Business 2149 N STATE RD 7 MARGATE, FL 33063	Mailing Address 2149 N STATE RD 7 MARGATE, FL 33063
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 65-1267920	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GENTILE, JOHN D
1601 N PALM AVE STE 212
PEMBROKE PINES, FL 33026

7. Name and Address of New Registered Agent

Name: ALEXANDER R. MENDEZ
Street Address (P.O. Box Number is Not Acceptable): 2149 N STATE RD 7
City: MARGATE FL Zip Code: 33063

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Alexander R. Mendez DATE: 10-23-07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP MENDEZ, ALEXANDER R 7325 NW 24TH ST 7 MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP MENDEZ, ALEXANDER R. 11807 NW 9 ST CORAL SPRINGS, FL 33071 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCPS PEREZ, EDISON 3350 BONITO LN MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400111534894 10/31/07--01010--004 **158.75 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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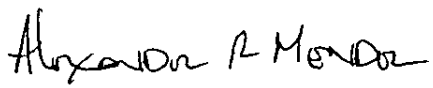
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alexander R. Mendez DATE: 10-23-07 754-235-3467
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D'Caballeros Barber Shop Group, Inc
2149 N State RD 7
Margate, FL 33063

To Whom It May Concern:

We did receive prior notice but we were not aware that we had to pay a yearly fee to keep the corporation active. This is our first year with the corporation and it was not clear to us that we had to submit this report. Thank you for all your understanding.


Alexander R Mendez, Co-Presindent

10-23-07
Date