

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000034544

Entity Name: EVELYN URDANETA, P.A.

FILED
Dec 05, 2007
Secretary of State

Current Principal Place of Business:

3845 POND APPLE DR
WESTON, FL 33332

New Principal Place of Business:

1855 ANDROMEDA LN
WESTON, FL 33327

Current Mailing Address:

3845 POND APPLE DR
WESTON, FL 33332

New Mailing Address:

1855 ANDROMEDA LN
WESTON, FL 33327

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URDANETA, EVELYN
3845 POND APPLE DR
WESTON, FL 33332 US

Name and Address of New Registered Agent:

URDANETA, EVELYN
1855 ANDROMEDA LN
WESTON, FL 33327 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: EVELYN URDANETA

12/05/2007

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: URDANETA, EVELYN
Address: 3845 POND APPLE DR
City-St-Zip: WESTON, FL 33332

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: URDANETA, EVELYN
Address: 1855 ANDROMEDA LN
City-St-Zip: WESTON, FL 33327

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: EVELYN URDANETA

P

12/05/2007

Electronic Signature of Signing Officer or Director

Date