2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 13, 2009
Secretary of State

DOCUMENT# P06000037919

Entity Name: CAPITAL CITY IMPORTS, INC.

Current Principal Place of Business:

1879 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301

New Principal Place of Business:

1879 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

Current Mailing Address:

1879 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301

New Mailing Address:

PO BOX 12124
TALLAHASSEE, FL 32317

FEI Number: 11-3814486 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRELL, LARRY T
1879 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CHARROIN, DAVID L
1879 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32301 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: DAVID L CHARROIN 10/13/2009
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: PD ( ) Delete
Name: HARRELL, LARRY T
Address: 3404 ARGUNAUT CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CHARROIN, DAVID L
Address: 559 KIMS LANE
City-St-Zip: LAMONT, FL 32336

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: DAVID L CHARROIN PD 10/13/2009
Electronic Signature of Signing Officer or Director Date