

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000059869

Entity Name: LGN ENTERPRISES INC.

**FILED**  
**Apr 09, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

4561 WEST MCNAB RD  
21  
POMPANO BEACH, FL 33069

## **New Principal Place of Business:**

5889 NW WESLEY RD  
PORT ST LUCIE, FL 34986

## **Current Mailing Address:**

4561 WEST MCNAB RD  
21  
POMPANO BEACH, FL 33069

## **New Mailing Address:**

5889 NW WESLEY RD  
PORT ST LUCIE, FL 34986

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

## **Name and Address of Current Registered Agent:**

LOZANO, JOSE L  
4561 WEST MCNAB RD  
21  
POMPANO BEACH, FL 33069 US

## **Name and Address of New Registered Agent:**

LOZANO, JOSE L  
5889 NW WESLEY RD  
PORT ST LUCIE, FL 34986 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: JOSE LUIS LOZANO

04/09/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: LOZANO, JOSE L  
Address: 5889 NW WESLEY RD  
City-St-Zip: PORT ST LUCIE, FL 34986

I hereby 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 all other like empowered.

SIGNATURE: JOSE LUIS LOZANO

PRES

04/09/2010

Electronic Signature of Signing Officer or Director

Date