

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Feb 26, 2009  
Secretary of State**

DOCUMENT# P06000059899

Entity Name: AGUION CORPORATION

**Current Principal Place of Business:**

912 NE 36TH AVENUE  
HOMESTEAD, FL 33033

**New Principal Place of Business:**

912 NE 36TH AVENUE  
HOMESTEAD, FL 33033 US

**Current Mailing Address:**

912 NE 36TH AVENUE  
HOMESTEAD, FL 33033

**New Mailing Address:**

912 NE 36TH AVENUE  
HOMESTEAD, FL 33033 US

FEI Number: 20-8033152      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

AGUION, ANDRES  
912 NE 36TH AVENUE  
HOMESTEAD, FL 33033 US

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

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: ANDRES AGUION

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: AGUION, ANDRES  
Address: 912 NE 36TH AVENUE  
City-St-Zip: HOMESTEAD, FL 33033

Title: ST ( ) Delete  
Name: ESCOBAR, CLEMENCIA  
Address: 912 NE 36TH AVENUE  
City-St-Zip: HOMESTEAD, FL 33033

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: ESCOBAR, CLEMENCIA  
Address: 912 NE 36TH AVENUE  
City-St-Zip: HOMESTEAD, FL 33033 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: ANDRES AGUION

Electronic Signature of Signing Officer or Director

P

02/26/2009

Date