

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000060105

FILED
Oct 05, 2007
Secretary of State

Entity Name: PROSPERITY ISLAND CORPORATION

Current Principal Place of Business:

16659 90TH STREET N
LOXAHATCHEE, FL 33470 US

New Principal Place of Business:

5784 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33417 US

Current Mailing Address:

16659 90TH STREET N
LOXAHATCHEE, FL 33470 US

New Mailing Address:

5784 OKEECHOBEE BLVD
WEST PALM BEACH, FL 33417 US

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

Name and Address of Current Registered Agent:

JOSEPH, WILBENS
16659 90TH STREET N
LOXAHATCHEE, FL 33470 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: WILBENS JOSEPH

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, T () Delete
Name: JOSEPH, NATACHA
Address: 16659 90TH STREET N
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: VP,S () Delete
Name: JOSEPH, WILBENS
Address: 16659 90TH STREET
City-St-Zip: LOXAHATCHEE, FL 33470 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P, T (X) Change () Addition
Name: JOSEPH, WILBENS
Address: 16659 90TH STREET N
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: VP,S (X) Change () Addition
Name: LAROUSSE, DARCELIN
Address: 121 SW 4TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435 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: WILBENS JOSEPH

Electronic Signature of Signing Officer or Director

P

10/05/2007

Date