

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000063881

FILED
Dec 04, 2008
Secretary of State

Entity Name: AMERICAN PAINT AND PLASTICS CORP

Current Principal Place of Business:

13050 NW 43 AV
OPA LOCKA, FL 33054

New Principal Place of Business:

Current Mailing Address:

888 BRICKELL KEY DRIVE
2801
MIAMI, FL 33131

New Mailing Address:

13050 NW 43 AV
OPA LOCKA, FL 33054

FEI Number: 20-4816112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERACASA, ALFREDO
888 BRICKELL KEY DRIVE
2801
MIAMI, FL 33131 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: ALFREDO BERACASA

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: PRE () Delete
Name: BERACASA, ALFREDO
Address: 888 BRICKELL KEY DRIVE #2801
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: BLANCO, ALBERTO
Address: 888 BRICKELL KEY DRIVE #2801
City-St-Zip: MIAMI, FL 33131

Title: SE/T () Delete
Name: BERACASA, ELIZABETH
Address: 888 BRICKELL KEY DRIVE #2801
City-St-Zip: MIAMI, FL 33131

Title: DIR () Delete
Name: BLANCO, WILLIAM
Address: 888 BRICKELL KEY DRIVE #2801
City-St-Zip: MIAMI, FL 33131

Title: DIR () Delete
Name: DICKSON, CARLOS
Address: 888 BRICKELL KEY DRIVE #2801
City-St-Zip: MIAMI, FL 33131

Title: DIR () Delete
Name: BECERRIL, HUMBERTO
Address: 888 BRICKELL KEY DRIVE #2801
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: ALFREDO BERACASA

PRE

12/04/2008

Electronic Signature of Signing Officer or Director

Date