

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000068660

FILED
Oct 05, 2007
Secretary of State

Entity Name: PARKER EXPORT MANAGEMENT, INC.

Current Principal Place of Business:

6205 BLUE LAGOON DR #300
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

6205 BLUE LAGOON DR #300
MIAMI, FL 33126

New Mailing Address:

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

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES INC
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

PARKER, MITCHELL
6205 BLUE LAGOON DRIVE
SUITE 300
MIAMI, FL 33126 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: MITCHELL PARKER

10/05/2007

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: PARKER, MITCHELL
Address: 6225 SW 123 TERR
City-St-Zip: MIAMI BEACH, FL 33156

Title: SD () Delete
Name: PARKER, DOUGLAS
Address: 4140 PINTA CT
City-St-Zip: CORAL GABLES, FL 33146

Title: TD () Delete
Name: PARKER, PHILIP
Address: 8465 SW 147 STREET
City-St-Zip: MIAMI BEACH, FL 33158

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:

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: MITCHELL PARKER

PD

10/05/2007

Electronic Signature of Signing Officer or Director

Date