

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000075087

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** MAURICA'S MOBILE DOG GROOMING INC.

**Current Principal Place of Business:**

4936 STEVE REEVES LN  
PLANT CITY, FL 33565 US

**New Principal Place of Business:**

**Current Mailing Address:**

4936 STEVE REEVES LN  
PLANT CITY, FL 33565 US

**New Mailing Address:**

**FEI Number:** 26-2506090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ACKER, MAURICA  
4936 STEVE REEVES LN  
PLANT CITY, FL 33565 US

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

DWIER - ACKER, MAURICA  
4936 STEVE REEVES LN  
PLANT CITY, FL 33565 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:** MAURICA DWIER ACKER

04/30/2008

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:** D ( ) Delete  
**Name:** ACKER, TIMOTHY  
**Address:** 4936 STEVE REEVES LN  
**City-St-Zip:** PLANT CITY, FL 33565 US

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

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

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

**Title:** PRES ( ) Change (X) Addition  
**Name:** DWIER ACKER, MAURICA  
**Address:** 4936 STEVE REEVES LN  
**City-St-Zip:** PLANT CITRY, FL 33565 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:** MAURICA DWIER ACKER

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date