

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000075634

FILED
Jul 16, 2008
Secretary of State

Entity Name: METROMIX, INC.

Current Principal Place of Business:

7353 INTERNATIONAL PLACE
SARASOTA, FL 34240 US

New Principal Place of Business:

8223 COOPER CREEK BLVD.
UNIVERSITY PARK, FL 34201 US

Current Mailing Address:

7353 INTERNATIONAL PLACE
SARASOTA, FL 34240 US

New Mailing Address:

8223 COOPER CREEK BLVD.
UNIVERSITY PARK, FL 34201 US

FEI Number: 20-5017363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, ALEX M
7353 INTERNATIONAL PLACE
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

GARCIA, ROSA M
8223 COOPER CREEK BLVD.
UNIVERSITY PARK, FL 34201 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: ROSA M. GARCIA

07/16/2008

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: P () Delete
Name: GARCIA, ROSA M
Address: 7353 INTERNATIONAL PLACE
City-St-Zip: SARASOTA, FL 34240 US

Title: T (X) Delete
Name: GARCIA, ALEX M
Address: 7353 INTERNATIONAL PLACE
City-St-Zip: SARASOTA, FL 34240 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, ROSA M
Address: 8223 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201 US

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: ROSA M. GARCIA

PRES

07/16/2008

Electronic Signature of Signing Officer or Director

Date