

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000078619

Entity Name: HAIMBERG-DREIFUSS INC.

FILED
Oct 26, 2009
Secretary of State

Current Principal Place of Business:

15465 TAKE OFF PLACE
WELLINGTON, FL 33414 US

New Principal Place of Business:

Current Mailing Address:

15465 TAKE OFF PLACE
WELLINGTON, FL 33414 US

New Mailing Address:

FEI Number: 20-5001005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DREIFUSS, TAMI R
15465 TAKE OFF PLACE
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

HAIMBERG, JOSEPH R
15465 TAKE OFF PLACE
WELLINGTON, FL 33414 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: JOSEPH HAIMBERG

10/26/2009

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: HAIMBERG, JOSEPH
Address: 15465 TAKE OFF PLACE
City-St-Zip: WELLINGTON, FL 33414 US

Title: T/S () Delete
Name: DREIFUSS, TAMI R
Address: 15465 TAKE OFF PLACE
City-St-Zip: WELLINGTON, FL 33414 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SH (X) Change () Addition
Name: DREIFUSS, TAMI R
Address: 15465 TAKE OFF PLACE
City-St-Zip: WELLINGTON, FL 33414 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: TAMI DREIFUSS

SH

10/26/2009

Electronic Signature of Signing Officer or Director

Date