2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# P06000078903

Entity Name: GOOD 2 GO WEST INDIES MART, INC

Current Principal Place of Business:

516C JOEL BLVD
516C
LEIGH ACRES, FL 33972

New Principal Place of Business:

516C JOEL BLVD
516C
LEIGH ACRES, FL 33936

Current Mailing Address:

516C JOEL BLVD
LEIGH ACRES, FL 33972

New Mailing Address:

516C JOEL BLVD
516C
LEIGH ACRES, FL 33936

FEI Number: 68-0658781 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSON, ORLANDO
516C JOEL BLVD
LEIGH ACRES, FL 33972 US

Name and Address of New Registered Agent:

NELSON, ORLANDO
516C JOEL BLVD
LEIGH ACRES, FL 33936 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: ORLANDO NELSON 01/13/2009
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: PRES ( ) Delete
Name: NELSON, ORLANDO
Address: 516C JOEL BLVD
City-St-Zip: LEIGH ACRES, FL 33972

Title: VP ( ) Delete
Name: NELSON, LAVERN
Address: 178 MURDOCK CIRCLE
City-St-Zip: PORT CHAROLETTE, FL 33948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: NELSON, ORLANDO
Address: 516C JOEL BLVD
City-St-Zip: LEIGH ACRES, FL 33936

Title: VP (X) Change ( ) Addition
Name: NELSON, LAVERN
Address: 723 MICHEAL AVE
City-St-Zip: LEHIGH ACRES, FL 33936

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: ORLANDO NELSON PRES 01/13/2009
Electronic Signature of Signing Officer or Director Date