## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000084660

Entity Name: CHARLIES HOBBIES, INC

TAMPA, FL 33624 US

City-St-Zip:

FILED Oct 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7530 W. WATERS AVE TAMPA, FL 33615 **Current Mailing Address: New Mailing Address:** 7530 W. WATERS AVE TAMPA, FL 33615 FEI Number: 20-5083971 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TESTA, PHILIP J SR 4726-B'N. LOIS AVE. TAMPA, FL 33614 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: PHILIP J TESTA SR 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LOPEZ, CLAUDIO Name: Name: 10157 CEDAR DUNE DR Address: Address: City-St-Zip: TAMPA, FL 33624 US City-St-Zip: Title: Title: () Change () Addition () Delete Name: LOPEZ, MERCEDES Name: 10157 CEDAR DUNE DR Address: 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: CLAUDIO LOPEZ D 10/12/2009