

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000092897

Entity Name: LUZ VICTORIA P.A.

FILED
Oct 23, 2009
Secretary of State

Current Principal Place of Business:

556 LIVEOAK LANE
WESTON, FL 33327

New Principal Place of Business:

19154 STONEBROOK
WESTON, FL 33332

Current Mailing Address:

556 LIVEOAK LANE
WESTON, FL 33327

New Mailing Address:

19154 STONEBROOK ST
WESTON, FL 33332

FEI Number: 20-5204662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VICTORIA, LUZ
556 LIVEOAK LANE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

VICTORIA, LUZ
19154 STONEBROOK ST
WESTON, FL 33332 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: LUZ VICTORIA

10/23/2009

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: VICTORIA, LUZ
Address: 556 LIVEOAK LANE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VICTORIA, LUZ
Address: 19154 STONEBROOK ST
City-St-Zip: WESTON, FL 33332

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: LUZ VICTORIA

PRES

10/23/2009

Electronic Signature of Signing Officer or Director

Date