

2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED

09 APR -1 PM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/4/08 01022 007 150.00



DOCUMENT # P06000104417 1. Entity Name PASCO P.R. DEVELOPMENT, CORP.					
Principal Place of Business 4103 SPARROW CT. TAMPA, FL 33558			Mailing Address 4103 SPARROW CT. TAMPA, FL 33558		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 8748 Handel Loop			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Land O' Lakes, Fl.		4. FEI Number 20-5495362	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33437		Country Pasco		Applied For Not Applicable	
6. Name and Address of Current Registered Agent RAMOS, JOSE S. 4103 SPARROW CT. TAMPA, FL 33558				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SEGARRA, JUAN A. 4103 SPARROW CT. TAMPA, FL 33558	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LIZ, SANDRA P. 4103 SPARROW CT. TAMPA, FL 33558	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	700137608337 04/01/09--01038--023 **150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	Secretary Reynaldo Geerken 8748 Handel Loop Land O' Lakes, Fl 33437			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	Treasurer Pedro Suarez 8748 Handel Loop Land O' Lakes, Fl 33437			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	VICE PRESIDENT ANDRES REYES 8748 Handel Loop			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	Vice President 8748 Handel Loop Land O' Lakes, Fl 33437			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other fee empowered.					
SIGNATURE:		Juan A. Segarra Pres. 3/25/09 813-507-9822			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			