

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000112784

Entity Name: RULIZALI NURSERY, INC.

FILED
Dec 11, 2008
Secretary of State

Current Principal Place of Business:

26101 SW 167 AVE
HOMESTEAD, FL 33031

New Principal Place of Business:

14761 SW 298 TE
HOMESTEAD, FL 33033

Current Mailing Address:

26101 SW 167 AVE
HOMESTEAD, FL 33031

New Mailing Address:

14761 SW 298 TE
HOMESTEAD, FL 33033

FEI Number: 20-5497325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, RUBEN
26101 SW 167 AVE
HOMESTEAD, FL 33031 US

Name and Address of New Registered Agent:

FERNANDEZ, RUBEN
14761 SW 298 TE
HOMESTEAD, FL 33033 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: RUBEN FERNANDEZ

12/11/2008

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: FERNANDEZ, RUBEN
Address: 26101 SW 167 AVE
City-St-Zip: HOMESTEAD, FL 33031

Title: V () Delete
Name: RABAZA, LIZ
Address: 26101 SW 167 AVE
City-St-Zip: HOMESTEAD, FL 33031

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERNANDEZ, RUBEN
Address: 14761 SW 298 TE
City-St-Zip: HOMESTEAD, FL 33033

Title: V (X) Change () Addition
Name: RABAZA, LIZ
Address: 14761 SW 298 TE
City-St-Zip: HOMESTEAD, FL 33033

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: RUBEN FERNANDEZ

P

12/11/2008

Electronic Signature of Signing Officer or Director

Date