## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000114305

Entity Name: GRACE INVESTMENT GROUP INC.

**FILED** Apr 30, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

14395 SW 139 CT., UNIT 106 MIAMI, FL 33186

**Current Mailing Address: New Mailing Address:** 

14395 SW 139 CT., UNIT 106 MIAMI, FL 33186

FEI Number: 20-5633036 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:

**TOLANI NARESH** TOLANI, NARESH 9832 S.W 9832 S.W 158 COURT 158 COURT MIAMI, FL 33196 US MIAMI, FL 33196 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: N TOLANI 04/30/2009

> 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:**

(X) Change ( ) Addition Title: DPST

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete TOLANI, NARESH M. Name: Name: TOLANI, NARESH M 14395 SW 139 CT., UNIT 106 14395 SW 139 CT., UNIT 106 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: DV Title: DV (X) Change ( ) Addition () Delete Name: TOLANI, CHANDNI N. Name: TOLANI, CHANDNI N

14395 SW 139 CT., UNIT 106 Address: 14395 SW 139 CT., UNIT 106 Address:

MIAMI, FL 33186 MIAMI, FL 33186 City-St-Zip: City-St-Zip:

Title: Title:

(X) Change ( ) Addition ( ) Delete TOLANI, MOHINI M. Name: TOLANI, MOHINI M Name:

14395 SW 139 CT., UNIT 106 14395 SW 139 CT., UNIT 106 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

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.

Ρ SIGNATURE: N TOLANI 04/30/2009