

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P06000116379	
1. Entity Name DRAGON MOONZ CORP	



FILED

07 OCT 12 AM 11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 2954 SW 38 AVENUE MIAMI, FL 33134	Mailing Address 2954 SW 38 AVENUE MIAMI, FL 33134
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2. Principal Place of Business - No P.O. Box # 479 SW 38 ST	3. Mailing Address 479 SW 38 ST
Suite, Apt. #, etc. 1	Suite, Apt. #, etc. 1



City & State MIAMI FLORIDA	City & State MIAMI FLORIDA
Zip 33130	Zip 33130
Country	Country

4. FEI Number 593814162	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent RODRIGUEZ, YESENIA 2954 SW 38 AVENUE MIAMI, FL 33134		7. Name and Address of New Registered Agent Name: Yesenia Rodriguez Street Address (P.O. Box Number is Not Acceptable): 479 SW 38 ST #1 479 SW 380 Street #1 City: MIAMI FL Zip Code: 33130	
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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: 10/4/07

FILE NOW!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES RODRIGUEZ, YESENIA 2954 SW 38 AVENUE MIAMI, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES Yesenia Rodriguez <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 479 SW 380 ST #1 MIAMI FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC RODRIGUEZ, YESENIA 2954 SW 38 AVENUE MIAMI, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC Yesenia Rodriguez <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 479 SW 380 ST #1 MIAMI FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA RODRIGUEZ, YESENIA 2954 SW 38 AVENUE MIAMI, FL 33134 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA Yesenia Rodriguez <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 479 SW 38 ST #1 MIAMI FL 33130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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 like empowered.

SIGNATURE: 10/4/07 (786) 357-7891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR