

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000122541

**FILED**  
**May 01, 2014**  
**Secretary of State**

**Entity Name:** PEDRO RAMIREZ CONSTRUCTION, CORP

**Current Principal Place of Business:**

549 SW 18 AVE  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

549 SW 18 AVE  
HOMESTEAD, FL 33030

**New Mailing Address:**

**FEI Number:** 20-5621641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RAMIREZ, PEDRO  
549 SW 18 AVE  
HOMESTEAD, FL 33030 US

**Name and Address of New Registered Agent:**

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:** PEDRO RAMIREZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** RAMIREZ, PEDRO  
**Address:** 549 SW 18 AVE  
**City-St-Zip:** HOMESTEAD, FL 33030

**Title:** V  
**Name:** MAGALLAN, ROBERTO  
**Address:** 549 SW 18 AVE  
**City-St-Zip:** HOMESTEAD, FL 33030

I hereby 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 all other like empowered.

**SIGNATURE:** PEDRO RAMIREZ

P

05/01/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date