2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000145193

Entity Name: SANTA LUCIA FISHING CORP

FILED Oct 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

217 SE 47TH TERRACE 1007 DAVIDSON ROAD CAPE CORAL, FL 33904 CLEWISTON, FL 33440

Current Mailing Address: New Mailing Address:

217 SE 47TH TERRACE 1007 DAVIDSON ROAD CAPE CORAL, FL 33904 CLEWISTON, FL 33440

FEI Number: 20-5923951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

RODRIGUEZ, AGNES VARELA, ALBA 217 SE 47TH TERRACE 1007 DAVIDSON ROAD CAPE CORAL, FL 33904 US US CLEWISTON, FL 33440

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: ALBA VARELA 10/18/2008

> 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:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition RODRIGUEZ, AGNES Name: Name: VARELA, ALBA MRS 1007 DAVIDSON ROAD Address: Address:

217 SE 47TH TERRACE CAPE CORAL, FL 33904 City-St-Zip: CLEWISTON, FL 33440

Title: VΡ Title: (X) Change () Addition () Delete Name: MOREJON, HERIBERTO Name: HECHAVARRIA, DIEGO MR 217 SE 47TH TERRACE 1007 DAVIDSON ROAD Address: Address: CAPE CORAL, FL 33904 CLEWISTON, FL 33440 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition HERNANDEZ, ADONIS HERNANDEZ, ADONIS MR Name: Name:

2101 SE 8TH TERRACE 4510 S. E. 9TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: CAPE CORAL, FL 33990

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: ALBA VARELA 10/18/2008