

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000006264

FILED
Feb 04, 2009
Secretary of State

Entity Name: RONILEE INTERNATIONAL, INC.

Current Principal Place of Business:

5036 DR. PHILLIPS BLVD
215
ORLANDO, FL 32819

New Principal Place of Business:

3249 W. SOUTH STREET
ORLANDO, FL 32805

Current Mailing Address:

5036 DR. PHILLIPS BLVD
215
ORLANDO, FL 32819

New Mailing Address:

3249 W. SOUTH STREET
ORLANDO, FL 32805

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

Name and Address of Current Registered Agent:

PARAMORE, SHERRY D
5036 DR. PHILLIPS BLVD
215
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

PARAMORE, SHERRY D
3249 W. SOUTH STREET
ORLANDO, FL 32805 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: SHERRY PARAMORE

02/04/2009

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:

Title: P () Delete
Name: PARAMORE, SHERRY
Address: 5036 DR. PHILLIPS BLVD
City-St-Zip: ORLANDO, FL 32805

Title: V () Delete
Name: PRIESTER, ROSA
Address: 3259 W. SOUTH STREET
City-St-Zip: ORLANDO, FL 32805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PARAMORE, SHERRY
Address: 3249 W. SOUTH STREET
City-St-Zip: ORLANDO, FL 32805

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHERRY PARAMORE

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date