

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000021855

Entity Name: MAYELIN VALDES, P.A.

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1660 SW 66 CT  
W MIAMI, FL 33155 US

## **New Principal Place of Business:**

888 S DOUGLAS RD  
905  
CORAL GABLES, FL 33134 US

## **Current Mailing Address:**

1660 SW 66 CT  
W MIAMI, FL 33155 US

## **New Mailing Address:**

888 S DOUGLAS RD  
905  
CORAL GABLES, FL 33134 US

FEI Number: 20-8587213

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VALDES, MAYELIN  
1660 SW 66 CT  
W MIAMI, FL 33155 US

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

VALDES, MAYELIN  
888 S DOUGLAS RD  
905  
CORAL GABLES, FL 33134 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: MAYELIN

03/08/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: VALDES, MAYELIN  
Address: 888 S DOUGLAS RD #905  
City-St-Zip: CORAL GABLES, FL 33134

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: MAYELIN

PD

03/08/2011

Electronic Signature of Signing Officer or Director

Date