

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000060311

**FILED**  
**Nov 03, 2011**  
**Secretary of State**

**Entity Name:** SPLIT ENDS AT WINSTON PARK, INC

**Current Principal Place of Business:**

5395 LYONS RD  
POMPANO BEACH, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

5395 LYONS RD  
POMPANO BEACH, FL 33073

**New Mailing Address:**

126 NW MADISON CT  
PORT SAINT LUCIE, FL 34986

**FEI Number:** 77-0688189

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORREA, JOSEPH A  
126 NW MADISON CT  
PORT SAINT LUCIE, FL 34986 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:** JOE CORREA

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CORREA, DIANA  
**Address:** 126 NW MADISON CT  
**City-St-Zip:** PORT SAINT LUCIE, FL 34986 US

**Title:** VP  
**Name:** CORREA, JOSEPH A  
**Address:** 126 NW MADISON CT  
**City-St-Zip:** PORT SAINT LUCIE, FL 34986 US

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:** DIANA CORREA

P

11/03/2011

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

\_\_\_\_\_  
Date