

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000069834

FILED
Jan 21, 2009
Secretary of State

Entity Name: GISELE OLIVEIRA, CORP.

Current Principal Place of Business:

3624 NW 5TH TERRACE
BOCA RATON, FL 33431

New Principal Place of Business:

9471 SATINLEAF PL
PARKLAND, FL 33076

Current Mailing Address:

3624 NW 5TH TERRACE
BOCA RATON, FL 33431

New Mailing Address:

9471 SATINLEAF PL
PARKLAND, FL 33076

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

Name and Address of Current Registered Agent:

OLIVEIRA, GISELE R
3624 NW 5TH TERRACE
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

OLIVEIRA, GISELE R
9471 SATINLEAF PL
PARKLAND, FL 33076 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: GISELE R. OLIVEIRA

01/21/2009

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: PVPT () Delete
Name: OLIVEIRA, GISELE R
Address: 3624 NW 5TH TERRACE
City-St-Zip: BOCA RATON, FL 33431

Title: SD () Delete
Name: OLIVEIRA, GISELE R
Address: 3624 NW 5TH TERRACE
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVPT (X) Change () Addition
Name: OLIVEIRA, GISELE R
Address: 9471 SATINLEAF PL
City-St-Zip: PARKLAND, FL 33076

Title: SD (X) Change () Addition
Name: OLIVEIRA, GISELE R
Address: 9471 SATINLEAF PL
City-St-Zip: PARKLAND, FL 33076

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: GISELE R. OLIVEIRA

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01/21/2009

Electronic Signature of Signing Officer or Director

Date