

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000072380

Entity Name: VERA RESEARCH, CORP.

FILED
Jul 16, 2009
Secretary of State

Current Principal Place of Business:

18308 NW 78TH AVENUE
#L
MIAMI, FL 33015

New Principal Place of Business:

19634 NW 59 AVENUE
MIAMI, FL 33015

Current Mailing Address:

P. O. BOX 28541
HIALEAH, FL 33002

New Mailing Address:

19634 NW 59 AVENUE
MIAMI, FL 33015

FEI Number: 26-0394255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TAX DEFENSE CENTER, INC.
2350 W 84TH STREET
#18
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

CARLA X. VERA
19634 NW 59 AVENUE
MIAMI, FL 33015 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: CARLA X. VERA

07/16/2009

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: VERA, CARLA X
Address: P.O. BOX 28541
City-St-Zip: HIALEAH, FL 33002

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VERA, CARLA X 25%
Address: 19634 NW 59 AVENUE
City-St-Zip: MIAMI, FL 33015

Title: VP () Change (X) Addition
Name: VERA, JOSE A 25%
Address: 19634 NW 59 AVENUE
City-St-Zip: MIAMI, FL 33015

Title: TREA () Change (X) Addition
Name: VERA, JENNY M 25%
Address: 19634 NW 59 AVENUE
City-St-Zip: MIAMI, FL 33015

Title: SEC () Change (X) Addition
Name: KARLA, VERA D 25%
Address: 19634 NW 59 AVENUE
City-St-Zip: MIAMI, FL 33015

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: CARLA X. VERA

P

07/16/2009

Electronic Signature of Signing Officer or Director

Date