2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 29, 2009
Secretary of State

DOCUMENT# P07000080404

Entity Name: C.N.G. PROFESSIONAL GROUP, INC.

Current Principal Place of Business:

9290 S.W. SUNSET DR. #101
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

9290 S.W. SUNSET DR. #101
MIAMI, FL 33173

New Mailing Address:

FEI Number: 26-0618468 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACHADO, NICOMEDES
4923 S.W. 147 CT
MIAMI, FL 33185 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: NICOMEDES MACHADO

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: PD ( ) Delete
Name: MACHADO, NICOMEDES
Address: 4923 SW 147 CT
City-St-Zip: MIAMI, FL 33185

Title: VD ( ) Delete
Name: MENESES, CARLOS
Address: 12008 SW 110 STREET CIR SOUTH
City-St-Zip: MIAMI, FL 33186

Title: TD ( ) Delete
Name: CONILL, GILBERTO
Address: 10873 NW 7TH STREET #21
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NICOMEDES MACHADO PD 10/29/2009

Electronic Signature of Signing Officer or Director Date