

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000084378

**FILED**  
**Feb 27, 2009**  
**Secretary of State**

**Entity Name:** FADE FACTORY BARBER SHOP, INC.

**Current Principal Place of Business:**

% 1160 REDMAN STREET, APT C  
ORLANDO, FL 32839

**New Principal Place of Business:**

8139 VALENCIA COLLEGE LANE  
ORLANDO, FL 32825

**Current Mailing Address:**

% 1160 REDMAN STREET, APT C  
ORLANDO, FL 32839

**New Mailing Address:**

8139 VALENCIA COLLEGE LANE  
ORLANDO, FL 32825

**FEI Number:** 26-0656446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAZQUEZ, THEODORE  
1160 REDMAN STREET, APT C  
ORLANDO, FL 32839 US

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

VAZQUEZ, THEODORE  
4124 MAU MAU LANE  
ORLANDO, FL 32822 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: THEODORE VAZQUEZ

02/27/2009

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: PTSD ( ) Delete  
Name: VAZQUEZ, THEODORE  
Address: 1160 REDMAN STREET APT C  
City-St-Zip: ORLANDO, FL 32839

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: VAZQUEZ, THEODORE  
Address: 4124 MAU MAU LANE  
City-St-Zip: ORLANDO, FL 32822

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: THEODORE VAZQUEZ

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02/27/2009

Electronic Signature of Signing Officer or Director

Date