

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000088792

Entity Name: MYSTIC STONE, INC.

FILED
Sep 29, 2008
Secretary of State

Current Principal Place of Business:

11536 MISTY ISLE LN
RIVERVIEW, FL 33569

New Principal Place of Business:

1410 VILLA CAPRI CIR
204
ODESSA, FL 33556

Current Mailing Address:

11536 MISTY ISLE LN
RIVERVIEW, FL 33569

New Mailing Address:

1410 VILLA CAPRI CIR
204
ODESSA, FL 33556

FEI Number: 26-0680163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1261 E SAMPLE RD.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

TAX HOUSE CORPORATION
1100 S FEDERAL HWY
2ND FLOOR
DEERFIELD BEACH, FL 33441 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: TAX HOUSE CORPORATION

09/29/2008

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: SILVA, ALFREDO M
Address: 11536 MISTY ISLE LN
City-St-Zip: RIVERVIEW, FL 33569

Title: PD (X) Delete
Name: FREIRE, DANIEL D
Address: 11536 MISTY ISLE LANE
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREIRE, DANIEL D
Address: 1410 VILLA CAPRI CIR 204
City-St-Zip: ODESSA, FL 33556

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: DANIEL D FREIRE

PD

09/29/2008

Electronic Signature of Signing Officer or Director

Date