

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000094522

FILED  
Nov 05, 2008  
Secretary of State

Entity Name: GOOD DEAL SHIPPING & CARGO SERVICES, INC.

## Current Principal Place of Business:

5244 LIGHTHOUSE ROAD  
ORLANDO, FL 32808

## New Principal Place of Business:

1401 N. PINE HILLS ROAD SUITE B  
ORLANDO, FL 32808

## Current Mailing Address:

5244 LIGHTHOUSE ROAD  
ORLANDO, FL 32808

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

MAUREPAS, WISNEL  
5244 LIGHTHOUSE ROAD  
ORLANDO, FL 32808 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: WISNEL MAUREPAS

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: MAUREPAS, WISNEL  
Address: 5244 LIGHTHOUSE ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: V ( ) Delete  
Name: PREVILUS, JEAN N  
Address: 6905 COLONY OAKS LANE  
City-St-Zip: ORLANDO, FL 32808

Title: T ( ) Delete  
Name: PREVILUS, JEAN PAUL  
Address: 6905 COLONY OAKS LANE  
City-St-Zip: ORLANDO, FL 32808

Title: S ( ) Delete  
Name: PERICLES, LUCSON  
Address: 551 NW 42 COURT, APT. 204  
City-St-Zip: POMPANO BEACH, FL 33064

Title: S ( ) Delete  
Name: MAUREPAS, EMMANUEL  
Address: 5244 LIGHTHOUSE ROAD  
City-St-Zip: ORLANDO, FL 32808

Title: T ( ) Delete  
Name: PREVILUS, JOSUE  
Address: 3024 N POWERS DRIVE #212  
City-St-Zip: ORLANDO, FL 32818

## 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:

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: WISNEL MAUREPAS

P

11/05/2008

Electronic Signature of Signing Officer or Director

Date