

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000099725

Entity Name: DDMJJ CORPORATION

FILED
Mar 03, 2009
Secretary of State

Current Principal Place of Business:

2017 S.W. CLOVERLEAF ST.
PORT ST. LUCIE, FL 34953 US

New Principal Place of Business:

2017 S.W. MONTERREY LANE
PORT ST. LUCIE, FL 34953 US

Current Mailing Address:

2017 S.W. CLOVERLEAF ST.
PORT ST. LUCIE, FL 34953 US

New Mailing Address:

2017 S.W. MONTERREY LANE
PORT ST. LUCIE, FL 34953 US

FEI Number: 38-3766726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAIRD-GRAZ, BRITT
2017 S.W. MONTERREY LN.
PORT ST. LUCIE, FL 34953 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: BRITT BAIRD-GRAZ

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: PRES () Delete
Name: BAIRD-GRAZ, BRITT
Address: 2017 S.W. CLOVERLEAF ST.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: TRES () Delete
Name: GRAZ, DANIEL
Address: 2017 S.W. CLOVERLEAF ST.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: SECT () Delete
Name: BAIRD-GRAZ, BRITT
Address: 2017 S.W. CLOVERLEAF ST.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: DIR (X) Delete
Name: BAIRD-GRAZ, BRITT
Address: 2017 S.W. CLOVERLEAF ST.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BAIRD-GRAZ, BRITT
Address: 2017 S.W. MONTERREY LANE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: TRES (X) Change () Addition
Name: GRAZ, DANIEL
Address: 2017 S.W. MONTERREY LANE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: SECT (X) Change () Addition
Name: BAIRD-GRAZ, BRITT M
Address: 2017 SW MONTERREY LANE
City-St-Zip: PORT ST. LUCIE, FL 34953

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: BRITT BAIRD-GRAZ

Electronic Signature of Signing Officer or Director

PRES

03/03/2009

Date