

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000112167

FILED  
Nov 02, 2009  
Secretary of State

Entity Name: DELISO CASTRO FLOWERS, INC.

## Current Principal Place of Business:

123 N. CONGRESS AVE. #355  
BOYNTON BEACH, FL 33436

## New Principal Place of Business:

## Current Mailing Address:

123 N. CONGRESS AVE. #355  
BOYNTON BEACH, FL 33436

## New Mailing Address:

FEI Number: 26-1214290

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOPE KAMSTRA, CPA, PA  
4400 N. FEDERAL HWY.  
SUITE 17  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

HOPE KAMSTRA, CPA  
1801 N. MILITARY TRAIL  
SUITE 160  
BOCA RATON, FL 33431 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: HOPE KAMSTRA, CPA

11/02/2009

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: P ( ) Delete  
Name: DELISO, MICHELE  
Address: 123 N. CONGRESS AVE. #355  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VP ( ) Delete  
Name: MONICA, DELISO A  
Address: 123 N. CONGRESS AVE. #355  
City-St-Zip: BOYNTON BEACH, FL 33436

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MICHELE DELISO

P

11/02/2009

Electronic Signature of Signing Officer or Director

Date