

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000053322

Entity Name: FLORIDA STAGEHANDS, INC

**FILED**  
**Jun 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5151 SW 70TH AVE.  
DAVIE, FL 33314

**New Principal Place of Business:**

1438 NE 26TH STREET  
WILTON MANORS, FL 33305

**Current Mailing Address:**

5151 SW 70TH AVE.  
DAVIE, FL 33314

**New Mailing Address:**

1438 NE 26TH STREET  
WILTON MANORS, FL 33305

FEI Number: 42-1764605

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MACKILLIGAN, ROBERT G  
2733 NE 15TH TERR  
WILTON MANORS, FL 33334 US

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

MACKILLIGAN, ROBERT G  
5151 SW 70TH AVE  
DAVIE, FL 33314 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: ROBERT G MACKILLIGAN

06/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: MACKILLIGAN, ROBERT G  
Address: 5151 SW 70TH AVE  
City-St-Zip: DAVIE, FL 33314

I hereby 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 all other like empowered.

SIGNATURE: ROBERT G MACKILLIGAN

PRES

06/14/2012

Electronic Signature of Signing Officer or Director

Date