

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000065255

Entity Name: HIGHLANDER GRAPHICS, INC.

FILED
Oct 16, 2009
Secretary of State

Current Principal Place of Business:

527 US HWY 17/92 N. SUITE B
HAINES CITY, FL 33844

New Principal Place of Business:

716 N SCENIC HWY
LAKE WALES, FL 33853

Current Mailing Address:

PO BOX 8663
LAKESHORE, FL 33854

New Mailing Address:

716 N SCENIC HWY
LAKE WALES, FL 33853

FEI Number: 36-4637511

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVA, JUAN ALBERTO
3021 CLUB CIRCLE
LAKESHORE, FL 33854 US

Name and Address of New Registered Agent:

SALVA, JUAN ALBERTO
7816 MONDALE AVE
LAKE WALES, FL 33898 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: JUAN A SALVA

10/16/2009

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: SALVA, JUAN ALBERTO
Address: 3021 CLUB CIRCLE
City-St-Zip: LAKESHORE, FL 33854

Title: S () Delete
Name: SALVA GARCIA, JUAN ALBERTO A II
Address: 7816 MONDALE AVE.
City-St-Zip: LAKE WALES, FL 33898

Title: T () Delete
Name: SALVA GARCIA, JUAN MIGUEL
Address: 7816 MONDALE AVE.
City-St-Zip: LAKE WALES, FL 33898

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALVA, JUAN ALBERTO
Address: 7816 MONDALE AVE
City-St-Zip: LAKE WALES, FL 33898

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: JUAN A SALVA

PRES

10/16/2009

Electronic Signature of Signing Officer or Director

Date