

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000068313

**FILED**  
**Nov 30, 2009**  
**Secretary of State**

**Entity Name:** MAGIC ART MOBILE SIGNS, INC.

**Current Principal Place of Business:**

7320 E. FLETCHER AVE.  
SUITE #105  
TAMPA, FL 33637

**New Principal Place of Business:**

1221 STIRLING ROAD  
SUITE #107  
DANIA, FL 33004

**Current Mailing Address:**

7320 E. FLETCHER AVE.  
SUITE #105  
TAMPA, FL 33637

**New Mailing Address:**

1221 STIRLING ROAD  
SUITE #107  
DANIA, FL 33004

**FEI Number:** 26-3005802

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALCALA, IRAIDES M  
7320 E. FLETCHER AVE.  
SUITE #105  
TAMPA, FL 33637 US

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

BW&T BUSINESS ADVISERS, INC  
9050 PINES BOULEVARD  
SUITE # 450  
PEMBROKE PINES, FL 33024 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: NAYARIT BRICENO

11/30/2009

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: HEILEMAN SCHADEN, IRENE  
Address: 7320 E. FLETCHER AVE.  
City-St-Zip: TAMPA, FL 33637

Title: VP ( ) Delete  
Name: ALCALA, IRAIDES  
Address: 7320 E. FLETCHER AVE.  
City-St-Zip: TAMPA, FL 33637

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HEILEMAN SCHADEN, IRENE  
Address: 1221 STIRLING ROAD SUITE # 107  
City-St-Zip: DANIA BEACH, FL 33004

Title: VP (X) Change ( ) Addition  
Name: ALCALA, IRAIDES  
Address: 1221 STIRLING ROAD SUITE # 107  
City-St-Zip: DANIA BEACH, FL 33004

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: HEILEMAN SCHADEN, IRENE

P

11/30/2009

Electronic Signature of Signing Officer or Director

Date