

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000025826

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Entity Name:** LIMA TROPICAL GENERAL SERVICES CORP

**Current Principal Place of Business:**

4069 CROCKERS LAKE BLVD  
2822  
SARASOTA, FL 34238

**New Principal Place of Business:**

**Current Mailing Address:**

4069 CROCKERS LAKE BLVD  
2822  
SARASOTA, FL 34238

**New Mailing Address:**

**FEI Number:** 26-4509470

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRILLIANT TAX SERVICES CORP  
3407 CLARK RD # 108  
SARASOTA, FL 34231 US

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

LIMA, ERIVALDO  
4069 CROCKERS LAKE BLVD  
SARASOTA, FL 34231 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: ERIVALDO LIMA

10/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LIMA, ERIVALDO  
Address: 4069 CROCKERS LAKE BLVD # 2822  
City-St-Zip: SARASOTA, FL 34238 US

Title: VP  
Name: MATOS, SALOMAO  
Address: 4069 CROCKERS LAKE BLVD # 2822  
City-St-Zip: SARASOTA, FL 34238 US

Title: S  
Name: DE ARAUJO, JAILSON  
Address: 4069 CROCKERS LAKE BLVD # 2822  
City-St-Zip: SARASOTA, FL 34238 US

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: ERIVALDO LIMA

P

10/04/2010

Electronic Signature of Signing Officer or Director

Date