

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000031260

**FILED**  
**Oct 26, 2011**  
**Secretary of State**

**Entity Name:** DISTRIBUIDORA LA PORTENA, CORP.

**Current Principal Place of Business:**

550 BILTMORE WAY  
SUITE 209  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

8312 NW 68 STREET  
MIAMI, FL 33166

**Current Mailing Address:**

550 BILTMORE WAY  
SUITE 209  
CORAL GABLES, FL 33134

**New Mailing Address:**

8312 NW 68 STREET  
MIAMI, FL 33166

**FEI Number:** 27-2343559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LECUNA, RICHARD J  
550 BILTMORE WAY  
SUITE 209  
CORAL GABLES, FL 33134 US

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

LECUNA, RICHARD J  
8312 NW 68 STREET  
MIAMI, FL 33166 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: RICHARD J LECUNA

10/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: LECUNA, RICHARD J  
Address: 8312 NW 68 STREET  
City-St-Zip: MIAMI, FL 33166

Title: VSD  
Name: POMPA, MONICA  
Address: 8312 NW 68 STREET  
City-St-Zip: MIAMI, FL 33166

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: RICHARD LACUNA

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10/26/2011

Electronic Signature of Signing Officer or Director

Date