

**2012 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Nov 07, 2012  
Secretary of State**

DOCUMENT# P11000049772

**Entity Name:** MARIA NELLY DA SILVA F. P.A.

**Current Principal Place of Business:**

50 BISCAYNE BLVD.  
#1808  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

50 BISCAYNE BLVD.  
#1808  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 20-4492695      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DA SILVA F, MARIA N PD  
50 BISCAYNE BLVD  
#1808  
MIAMI, FL 33132 US

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

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: MARIA NELLY DA SILVA FIGUEIRA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DA SILVA, MARIA N  
Address: 50 BISCAYNE BLVD #1808  
City-St-Zip: MIAMI, FL 33132

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: MARIA NELLY DA SILVA FIGUEIRA

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

11/07/2012

\_\_\_\_\_  
Date