

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P11000052694

**FILED**  
**Nov 05, 2012**  
**Secretary of State**

**Entity Name:** TRADE XPRESS MARKETING, INC.

**Current Principal Place of Business:**

8725 NW 18 TERRACE  
SUITE 221  
DORAL, FL 33172

**New Principal Place of Business:**

8725 NW 18 TERRACE  
SUITE 221  
DORAL, FL 33172 UN

**Current Mailing Address:**

8725 NW 18 TERRACE  
SUITE 221  
DORAL, FL 33172

**New Mailing Address:**

**FEI Number:** 45-2476078      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

OCAMPO, ANTHONY  
1680 MICHIGAN AVENUE  
MIAMI BEACH, FL 33139 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:** ANTHONY OCAMPO

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** SUAREZ, LUZ N  
**Address:** 8725 NW 18 TERRACE #221  
**City-St-Zip:** DORAL, FL 33172

**Title:** SD  
**Name:** OROZCO, ADRIANA M  
**Address:** 8725 NW 18 TERRACE #221  
**City-St-Zip:** DORAL, FL 33172

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:** LUZ SUAREZ

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

PD

11/05/2012

\_\_\_\_\_  
Date