

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000076486

**FILED**  
**Apr 02, 2014**  
**Secretary of State**

**Entity Name:** MASVIDAL FINANCIAL SERVICES INC

**Current Principal Place of Business:**

1433 N.W. 13TH TERRACE  
MIAMI, FL 33125

**New Principal Place of Business:**

815 N.W 57 AVENUE  
200  
MIAMI, FL 33126

**Current Mailing Address:**

118 ZAMORA AVE., SUITE 307  
CORAL GABLES, FL 33134

**New Mailing Address:**

815 N.W. 57 AVE  
220  
MIAMI, FL 33126

**FEI Number:** 46-1131982

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, LATONIA PA  
12905 S.W. 40TH STREET  
203  
MIAMI, FL 33175 US

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

JOACIM, MASVIDAL  
815 N.W. 57 AVENUE  
200  
MIAMI, FL 33126 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:** JOACIM MASVIDAL

04/02/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MASVIDAL, JOACIM  
**Address:** 815 N.W. 57 AVE STE 200  
**City-St-Zip:** MIAMI, FL 33126 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:** JOACIM MASVIDAL

P

04/02/2014

Electronic Signature of Signing Officer or Director

Date