

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P93000056282

Entity Name: SHKOL, INC.

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

C/O SHOOP MOTORS  
1605 ALTON CT  
MIAMI BEACH, FL 33139 US

**New Principal Place of Business:**

**Current Mailing Address:**

339 POINCIANA ISLAND DRIVE  
SUNNY ISLES BEACH, FL 33160 US

**New Mailing Address:**

FEI Number: 65-0430300

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SHKOLNIK, RAUL  
275 WEST 33RD STREET  
MIAMI BEACH, FL 33140 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: RAUL SHKOLNIK

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: SHKOLNIK, ALEXANDER  
Address: 339 POINCIANA ISLAND DRIVE  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: V  
Name: SHKOLNIK, RAUL  
Address: 275 WEST 33RD STREET  
City-St-Zip: MIAMI BEACH, FL 33140

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: ALEXANDER SHKOLNIK

PST

02/01/2011

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

\_\_\_\_\_  
Date