## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P95000011921

Entity Name: QUISQUEYA LINES, INC.

FILED Apr 12, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3780 NW S RIVER DR 12731 NW 103 AVE

MIAMI, FL 33142 US HIALEAH GARDENS, FL 33018 US

**Current Mailing Address: New Mailing Address:** 

3780 NW S RIVER DR 12731 NW 103 AVE

MIAMI, FL 33142 HIALEAH GARDENS, FL 33018 US

FEI Number: 65-0551427 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ABREU, JOSE ABREU, JOSE 12731 N.W. 103RD AVENUE 12731 N.W. 103RD AVENUE US HIALEAH GARDENS, FL 33016 US HIALEAH GARDENS, FL 33018

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: JOSE ABREU 04/12/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: PSD (X) Change ( ) Addition

ABREU, JOSE Name: Name: ABREU, JOSE 12731 N.W. 103RD AVENUE 12731 N.W. 103RD AVENUE Address: Address:

City-St-Zip: HIALEAH GARDENS, FL 33016 City-St-Zip: HIALEAH GARDENS, FL 33018

Title: VD (X) Delete Title: () Change () Addition

ABREU, MILAGROS Name: Name: 12731 N.W. 103RD AVENUE Address: Address: HIALEAH GARDENS, FL 33016 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOSE ABREU **PSD** 04/12/2007