## 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000018083

Entity Name: SURVIVOR ENTERPRISES, INC.

FILED Oct 20, 2010 Secretary of State

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

1661 N.E. 57TH STREET 624 SW SAINT LUCIE CRESCENT FT. LAUDERDALE, FL 33334

#205

STUART, FL 34994

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

1661 N.E. 57TH STREET 624 SW SAINT LUCIE CRESCENT FT. LAUDERDALE, FL 33334

#205 STUART, FL 34994

FEI Number: 65-0645446 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

THOMPSON, SUSAN B THOMPSON, SUSAN B 1661 N.E. 57TH STREET 624 SW SAINT LUCIE CRESCENT FT. LAUDERDALE, FL 33334 US #205

STUART, FL 34994 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: SUSAN B. THOMPSON 10/20/2010

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

THOMPSON, SUSAN B Name:

624 SW SAINT LUCIE CRESCENT #205 Address:

City-St-Zip: STUART, FL 34994 US

Title: **VPTS** 

Name: THOMPSON, THOMPSON A JR

624 SW SAINT LUCIE CRESCENT #205 Address:

STUART, FL 34994 US City-St-Zip:

Title: C

MICHAEL, WILLIS D Name:

624 SW SAINT LUCIE CRESCENT #205 Address:

City-St-Zip: STUART, FL 34994 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.

Ρ SIGNATURE: SUSAN B. THOMPSON 10/20/2010