

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000088685

Entity Name: C.N.D. CORPORATION

FILED
Oct 12, 2009
Secretary of State

Current Principal Place of Business:

401 OPA LOCKA BLVD
OPA LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

1000 ST CHARLES PL #710
PEMBROKE PINES, FL 33026

New Mailing Address:

900 ST CHARLES PL
504
PEMBROKE PINES, FL 33026

FEI Number: 65-0709684

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORGAN, CAROL
1000 ST CHARLES PL #710
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

MORGAN, CAROL
900 ST CHARLES PL
504
PEMBROKE PINES, FL 33026 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: CAROL S MORGAN

10/12/2009

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:

Title: P () Delete
Name: MORGAN, DAVID
Address: 1000 SAINT CHARLES PLACE STE 710
City-St-Zip: PEMBROKE PINES, FL 33026

Title: S (X) Delete
Name: MORGAN, CAROL
Address: 1000 SAINT CHARLES PLACE STE 710
City-St-Zip: PEMBROKE PINES, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORGAN, CAROL
Address: 900 ST CHARLES PL #504
City-St-Zip: PEMBROKE PINES, FL 33026

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CAROL MORGAN

PRES

10/12/2009

Electronic Signature of Signing Officer or Director

Date