

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000008177

Entity Name: MY DOBLE "O", INC.

**FILED**  
**Jan 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5511 NE 16TH AVE  
FORT LAUDERDALE, FL 33334 US

**New Principal Place of Business:**

561 WEST 33RD ST  
HIALEAH, FL 33012 US

**Current Mailing Address:**

5511 NE 16TH AVE  
FORT LAUDERDALE, FL 33334 US

**New Mailing Address:**

561 WEST 33RD ST  
HIALEAH, FL 33012 US

FEI Number: 65-0721876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OLIVA, OMAR  
5511 NE 16TH AVE.  
FORT LAUDERDALE, FL 33334 US

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

OLIVA, OMAR  
561 WEST 33RD ST  
HIALEAH, FL 33012 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: OMAR OLIVA

01/03/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: OLIVA, OMAR  
Address: 561 WEST 33RD ST  
City-St-Zip: HIALEAH, FL 33012

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: OMAR OLIVA

P

01/03/2011

Electronic Signature of Signing Officer or Director

Date