

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P97000026130

Entity Name: C.G.Y. CORP.

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1626 SW MACKENCEA ST  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

1626 SW MACKENCEA ST  
PORT ST. LUCIE, FL 34953

**New Mailing Address:**

FEI Number: 65-0739049

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OVIES, EDUARDO  
3785 NW 82 AVENUE  
STE 302  
DORAL, FL 33166 US

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

OVIES, IDA C  
3785 NW 82 AVENUE  
STE 302  
DORAL, FL 33166 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: IDA C OVIES

03/25/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPT  
Name: ESCOBEDO, CARLOS  
Address: 1626 SW MACKENCEA ST  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: DVS  
Name: CALMO, GLADIS  
Address: 1626 SW MACKENCEA ST  
City-St-Zip: PORT ST. LUCIE, FL 34953

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: CARLOS ESCOBEDO

P

03/25/2011

Electronic Signature of Signing Officer or Director

Date