

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P97000105886

Entity Name: FLORIDA N & G CORP.

FILED
Oct 28, 2004
Secretary of State

Current Principal Place of Business:

2101 S UNIVERSITY DR
DAVIE, FL 33324

New Principal Place of Business:

2537 GOLF VIEW DR
WESTON, FL 33327

Current Mailing Address:

2101 S UNIVERSITY DR
DAVIE, FL 33324

New Mailing Address:

2537 GOLF VIEW DR
WESTON, FL 33327

FEI Number: 65-0809283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, NESLOR
2537 GOLF VIEW DRIVE
FORT LAUDERDALE, FL 333247 US

Name and Address of New Registered Agent:

GONZALEZ, NESTOR
2537 GOLF VIEW DRIVE
WESTON, FL 33327 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: NESTOR GONZALEZ

10/28/2004

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: GONZALEZ, NESTOR
Address: 2101 S. UNIVERSITY DR
City-St-Zip: DAVIE, FL 33324

Title: V () Delete
Name: GONZALEZ, ARMANDO
Address: 2101 S. UNIVERSITY DR
City-St-Zip: DAVIE, FL 33324

Title: S () Delete
Name: PARDO-LUZ, BETTY
Address: 2101 S UNIVERSITY DRIVE
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GONZALEZ, NESTOR
Address: 2537 GOLF VIEW DR
City-St-Zip: WESTON, FL 33327

Title: V (X) Change () Addition
Name: GONZALEZ, ARMANDO
Address: 2537 GOLF VIEW DR
City-St-Zip: WESTON, FL 33327

Title: S (X) Change () Addition
Name: PARDO-LUZ, BETTY
Address: 2537 GOLF VIEW DR
City-St-Zip: DAVIE, FL 33327

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NESTOR GONZALEZ

P

10/28/2004

Electronic Signature of Signing Officer or Director

Date