

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000027142

Entity Name: LAS GEMELAS, INC.

FILED  
Dec 20, 2006  
Secretary of State

## Current Principal Place of Business:

1380 STATE RD 29 S.  
LABELLE, FL 33935

## New Principal Place of Business:

## Current Mailing Address:

1380 STATE RD 29 S.  
LABELLE, FL 33935

## New Mailing Address:

FEI Number: 65-0820255

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CASTRO, LETICIA  
131 ELM STREET  
LABELLE, FL 33935 US

## Name and Address of New Registered Agent:

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: LITICIA M CASTRO

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: D ( ) Delete  
Name: CASTRO, JOSE A  
Address: 131 ELM STREET  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: CASTRO, LETICIA  
Address: 131 ELM STREET  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: GAMEZ, RODOLFO  
Address: 6724 VACASO ST  
City-St-Zip: LABELLE, FL 33935

Title: D ( ) Delete  
Name: GAMEZ, RODOLFO  
Address: 6724 VACASO ST.  
City-St-Zip: LABELLE, FL 33935

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition  
Name: CASTRO, JOSE A  
Address: 131 ELM STREET  
City-St-Zip: LABELLE, FL 33935

Title: PD (X) Change ( ) Addition  
Name: CASTRO, LETICIA  
Address: 131 ELM STREET  
City-St-Zip: LABELLE, FL 33935

Title: DT (X) Change ( ) Addition  
Name: GAMEZ, RODOLFO  
Address: 6724 VACASO ST  
City-St-Zip: LABELLE, FL 33935

Title: DS (X) Change ( ) Addition  
Name: GAMEZ, MARTHA  
Address: 6724 VACASO ST.  
City-St-Zip: LABELLE, FL 33935

I hereby certify that the information supplied with this filing does not qualify for the 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: LETICIA M CASTRO

Electronic Signature of Signing Officer or Director

P

12/20/2006

Date