2005 FOR PROFIT CORPORATION REINSTATEMENT

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SUITE OZY MIAMI, FL 33137 City FL Zip Code	PATERNO	OK, ZEV		Name	Name				
Addition MAMI, FL 33137 City FL Zip Code	35 NE 40TH STREET			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature									
THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOWITH FEE IS \$150.00 After January 1, 2000, Fee will be \$300.00 THE NOW PRINCE OF THE PROJECT OF THE COPPORT OF THE C				City			FL Zip Cox	de	
SIGNATURE Committee Commi	 The above the obligat 	named entity submits this statement for ions of registered agent.	the purpose of changing its rec	gistered office or re	egistered agent, or bo	th, in the State of F	orida. I am familiar with	, and accept	
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After January 1, 2008, Fee will be \$300.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE P STANBURY, JAN 265 S. COCCONUT LANE STREET ADDRESS CITY-ST-2P TITLE DOWNOY, DOUGLAS A 8037 STIRRUP CAY COURT BOYNTON BEACH, FL 33636 CITY-ST-2P TITLE NAME STREET ADDRESS CITY-ST-2P TITLE	SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE: Re	egistered Agent signatur	e required when reinstating				
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if									
changed, or on an attachment with an address, with all other like empowered.									