

2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 01, 2009
Secretary of State

DOCUMENT# P99000008533

Entity Name: LYSYS, INC.

Current Principal Place of Business:

3250 MARY ST
SUITE 404
MIAMI, FL 33133 US

New Principal Place of Business:

340 W HEATHER DRIVE
KEY BISCAYNE, FL 33149 US

Current Mailing Address:

2843 S BAYSHORE DRIVE
#14 C
MIAMI, FL 33133 US

New Mailing Address:

340 W HEATHER DRIVE
KEY BISCAYNE, FL 33149 US

FEI Number: 65-0913749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUGA, CARLOS J
2843 S BAYSHORE DRIVE
#14 C
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

RAFAEL, MORENO P
340 W HEATHER DRIVE
KEY BISCAYNE, FL 33149 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: RAFAEL P. MORENO

12/01/2009

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: PUGA, CARLOS J
Address: 3250 MARY ST SUITE 404
City-St-Zip: MIAMI, FL 33133

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: HAMILTON, TOMAS
Address: 340 W HEATHER DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DVP () Change (X) Addition
Name: ATRIA, MARTA
Address: 340 W HEATHER DRIVE
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify 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: TOMAS HAMILTON

DPTS

12/01/2009

Electronic Signature of Signing Officer or Director

Date