2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000062064

Entity Name: DOUCETTE ENTERPRISES, INC.

FILED Oct 06, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
1905 BANKS RD. MARGATE, FL 33063	
Current Mailing Address:	New Mailing Address:

1905 BANKS RD. MARGATE, FL 33063

FEI Number: 65-0933600 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DOUCETTE, NICK

3443 SW 11TH STREET

DEERFIELD BEACH, FL 33442 US

DOUCETTE, NICK

1905 BANKS RD

MARGATE, FL 33063 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: DAVID LOPEZ 10/06/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DOUCETTE, NICK DOUCETTE, NICK Name: Name: 1905 BANKS RD 3443 SW 11TH STREET Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: MARGATE, FL 33063

Title: V () Delete Title: V (X) Change () Addition

 Name:
 DOUCETTE, JACQUE
 Name:
 DOUCETTE, JACQUE

 Address:
 3553 SW 11TH ST
 Address:
 1905 BANKS RD

 City-St-Zip:
 DEERFIELD BEACH, FL 33442
 City-St-Zip:
 MARGATE, FL 33063

Title: () Delete Title: CM () Change (X) Addition

 Name:
 Name:
 LOPEZ, DAVID

 Address:
 Address:
 1905 BANKS RD

 City-St-Zip:
 City-St-Zip:
 MARGATE, FL 33063

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: DAVID LOPEZ CM 10/06/2009