

2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2006 DEC 28 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000068011

1. Entity Name
STRONG INTERGROUP, CORP.



Principal Place of Business
4551 E. LAKE DR
WINTER SPRINGS, FL 32708

Mailing Address
1400 N SEMORAN BLVD STE G
ORLANDO, FL 32807

2. Principal Place of Business
12328 GLADSTONE
Suite, Apt. #, etc.

3. Mailing Address
12328 GLADSTONE AVE
Suite, Apt. #, etc.

7
City & State
SYLMAR CA

#7
City & State
SYLMAR

Zip Country
91342 USA

Zip Country
91342 USA



12202006 REIN-P CR2E098 (11/05)

4. FEI Number
59-3589538
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NOTTI, LORENZO
4551 E. LAKE DRIVE
WINTER SPRINGS, FL 32708

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME HERNANDEZ, JUAN CARLOS
STREET ADDRESS 4551 E. LAKE DR
CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE VP ☐ Delete
NAME MEDINA, NORBERTO E
STREET ADDRESS SEGUROLA 4310
CITY-ST-ZIP BUENES AIRES, ARGENTINA.

TITLE TD ☐ Delete
NAME NOTTI, LORENZO
STREET ADDRESS 4551 E. LAKE DR
CITY-ST-ZIP WINTER SPRINGS, FL 32708

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
900082837739
12/28/06--01058--003 **150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

Lorenzo Notti

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-18-06

Date

661 755-5072

Daytime Phone #

112.00