

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P99000100817

Entity Name: M R SALUTES CORP.

**FILED**  
**Dec 05, 2007**  
**Secretary of State**

## **Current Principal Place of Business:**

5132 SW 140 PLACE  
MIAMI, FL 33175

## **New Principal Place of Business:**

## **Current Mailing Address:**

5132 SW 140 PLACE  
MIAMI, FL 33175

## **New Mailing Address:**

10760 SW 62 TERRACE  
MIAMI, FL 33173

FEI Number: 65-0974409

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

FIGUEREDO-VALLES, RUBEN F  
5132 SW 140 PLACE  
MIAMI, FL 33175 US

## **Name and Address of New Registered Agent:**

RUBEN F. FIGUEREDO-VALLES  
10760 SW 62 TERRACE  
MIAMI, FL 33173 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: RUBEN F. FIGUEREDO-VALLES

12/05/2007

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: PST ( ) Delete  
Name: FIGUEREDO-VALLES, RUBEN F  
Address: 340 WEST 19 STREET, #3  
City-St-Zip: HIALEAH, FL 33010

Title: VPD (X) Delete  
Name: FIGUEREDO, ARMANDO  
Address: 5132 SW 140 PLACE  
City-St-Zip: MIAMI, FL 33175

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: RUBEN F. FIGUEREDO-V, ALLES  
Address: 10760 SW 62 TERRACE  
City-St-Zip: MIAMI, FL 33173

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RUBEN F. FIGUEREDO-VALLES

PST

12/05/2007

Electronic Signature of Signing Officer or Director

Date