# I hereby 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 all other like empowered.

VICE PRESIDENT

SIGNATURE: SHARON RESTA

Electronic Signature of Signing Officer/Director Detail

**DOCUMENT# 693935** 

Entity Name: RESTA ENTERPRISES, INC.

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

2040 SW 22ND AVE FT LAUDERDALE, FL 33312

## **Current Mailing Address:**

2040 SW 22ND AVE FT LAUDERDALE. FL 33312

## FEI Number: 59-2102213

## Name and Address of Current Registered Agent:

RESTA, MICHAEL 2040 SW 22ND AVE FT LAUDERDALE, FL 33312 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:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	PS	Title	V
Name	RESTA, MICHAEL	Name	RESTA, SHARON
Address	2040 SW 22ND AVE	Address	2040 SW 22 AVE
City-State-Zip:	FT LAUDERDALE FL 33312	City-State-Zip:	FT. LAUDERDALE FL 33312

Certificate of Status Desired: No

04/15/2014

# FILED Apr 15, 2014 Secretary of State CC2546910506

Date

Date