

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000022068

Entity Name: BANIF FINANCE (USA) CORP.

FILED
Oct 12, 2009
Secretary of State

Current Principal Place of Business:

1001 BRICKELL BAY DRIVE
SUITE 1804
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1110 BRICKELL AVENUE
SUITE 310
MIAMI, FL 33131

New Mailing Address:

FEI Number: 32-0006395 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NS CORPORATE SERVICES INC.
1110 BRICKELL AVENUE
SUITE 310
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: NS CORPORATE SERVICES INC.

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: PD () Delete
Name: DE ALMEIDA, CARLOS DAVID D
Address: 1001 BRICKELL BAY DRIVE SUITE #1804
City-St-Zip: MIAMI, FL 33131

Title: DCEO () Delete
Name: CAPELA, SERGIO D ALMEIDA
Address: 1001 BRICKELL BAY DRIVE #1804
City-St-Zip: MIAMI, FL 33131

Title: DVS () Delete
Name: DECASO, EDWARD
Address: 1001 BRICKELL BAY DRIVE #1804
City-St-Zip: MIAMI, FL 33131

Title: DV () Delete
Name: RODRIGUES, JULIO
Address: 1001 BRICKELL BAY DRIVE #1804
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DVPS (X) Change () Addition
Name: DECASO, EDWARD
Address: 1001 BRICKELL BAY DRIVE #1804
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change () Addition
Name: RODRIGUES, JULIO
Address: 1001 BRICKELL BAY DRIVE #1804
City-St-Zip: MIAMI, FL 33131

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: DE CASO

Electronic Signature of Signing Officer or Director

D

10/12/2009

Date