

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000078396

Entity Name: URBANICA GROUP, CORPORATION

FILED  
Sep 21, 2005  
Secretary of State

## Current Principal Place of Business:

100 BAYVIEW DRIVE #510  
SUNNY ISLES, FL 33160

## New Principal Place of Business:

100 BAYVIEW DRIVE  
SUITE 510  
SUNNY ISLES, FL 33160 US

## Current Mailing Address:

100 BAYVIEW DRIVE #510  
SUNNY ISLES, FL 33160

## New Mailing Address:

100 BAYVIEW DRIVE  
SUITE 510  
SUNNY ISLES, FL 33160 US

FEI Number: 33-1015099

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CATIVA, JORGE H  
100 BAYVIEW DRIVE #510  
SUNNY ISLES, FL 33160 US

## Name and Address of New Registered Agent:

M & C ACCOUNTING SERVICES, INC.  
8249 NW 36TH ST  
SUITE 210  
MIAMI, FL 33166 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: MIGUEL A. CAMONES

09/21/2005

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: CATIVA, JORGE H  
Address: 100 BAYVIEW DRIVE #510  
City-St-Zip: SUNNY ISLES, FL 33160

Title: VD ( ) Delete  
Name: DUHALDE, ALEJANDRO  
Address: 100 BAYVIEW DRIVE #510  
City-St-Zip: SUNNY ISLES, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CATIVA, JORGE H  
Address: 100 BAYVIEW DRIVE SUITE 510  
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: VPS (X) Change ( ) Addition  
Name: HAIRE, SONYA C  
Address: 650 NE 64TH ST APT G309  
City-St-Zip: MIAMI, FL 33138 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SONYA C. HAIRE

VPS

09/21/2005

Electronic Signature of Signing Officer or Director

Date