

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000105054

FILED  
Sep 18, 2007  
Secretary of State

Entity Name: IMAGINE AYITI INC.

**Current Principal Place of Business:**

8050 NW 74TH AVENUE  
MIAMI, FL 33166 US

**New Principal Place of Business:**

6653 NW 107 PLACE  
MIAMI, FL 33178 US

**Current Mailing Address:**

8050 NW 74TH AVENUE  
MIAMI, FL 33166 US

**New Mailing Address:**

6653 NW 107 PLACE  
MIAMI, FL 33178 US

FEI Number: 86-1177209

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ROCOURT CHATELAIN, KARINE  
8050 NW 74TH AVENUE  
MIAMI, FL 33166 US

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

ROCOURT, KARINE  
6653 NW 107TH PLACE  
MIAMI, FL 33178 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: KARINE ROCOURT

09/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: ROCOURT CHATELAIN, KARINE  
Address: 8050 NW 74TH AVENUE  
City-St-Zip: MIAMI, FL 33166 US

Title: VP/D ( ) Delete  
Name: CASTERA, RAPHAELLE  
Address: 8050 NW 74TH AVENUE  
City-St-Zip: MIAMI, FL 33166 US

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

Title: P/D (X) Change ( ) Addition  
Name: ROCOURT, KARINE  
Address: 6653 NW 107 PLACE  
City-St-Zip: MIAMI, FL 33178 US

Title: VP/D (X) Change ( ) Addition  
Name: CASTERA, RAPHAELLE  
Address: 6653 NW 107 PLACE  
City-St-Zip: MIAMI, FL 33178 US

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: KARINE ROCOURT

P/D

09/18/2007

Electronic Signature of Signing Officer or Director

Date