

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P27588

FILED  
Dec 14, 2009  
Secretary of State

Entity Name: EFE NEWS SERVICES (U.S.) INC.

**Current Principal Place of Business:**

529 14TH ST NW  
SUITE 1252  
WASHINGTON, DC 20045 US

**New Principal Place of Business:**

**Current Mailing Address:**

529 14TH ST NW  
SUITE 1252  
WASHINGTON, DC 20045 US

**New Mailing Address:**

FEI Number: 52-1653883      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CT CORPORATION SYSTEM

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: GRIJELMO, ALEJANDRO  
Address: ESPRONCEDA, 32  
City-St-Zip: 28003 MADRID, SPAIN,

Title: M ( ) Delete  
Name: ALVAREZ, DOLORES  
Address: ESPRONCEDA,32  
City-St-Zip: MADRID, SPAIN, 28003

Title: EVT ( ) Delete  
Name: AZPIAZU, MARIA L  
Address: 529 14TH ST NW SUITE 1252  
City-St-Zip: WASHINGTON, DC 20045

Title: V ( ) Delete  
Name: SANCHEZ, EMILIO  
Address: 5959 BLUE LAGOON DRIVE  
City-St-Zip: MIAMI, FL 33126

Title: V ( ) Delete  
Name: MORENO, ELENA  
Address: 25 WEST 43RD ST SUITE 1512  
City-St-Zip: NEW YORK, NY 10036

Title: V ( ) Delete  
Name: BENITO, MARCELINO  
Address: 11757 KATY FREEWAY, SUITE 975  
City-St-Zip: HOUSTON, TX 77079

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

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

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

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

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

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

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: ALEJANDRO GRIJELMO

PD

12/14/2009

Electronic Signature of Signing Officer or Director

Date