

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000060819

FILED
Sep 29, 2006
Secretary of State

Entity Name: SOSAABE CORP.

Current Principal Place of Business:

1000 PONCE DE LEON BLVD.
#328
CORAL GABLES, FL 33134

New Principal Place of Business:

8190 WEST 26 AVENUE
MIAMI, FL 33016

Current Mailing Address:

1000 PONCE DE LEON BLVD.
#328
CORAL GABLES, FL 33134

New Mailing Address:

8190 WEST 26 AVENUE
MIAMI, FL 33016

FEI Number: 65-1015708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUARTE, EDGAR M
1000 PONCE DE LEON BLVD.
#328
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

DUARTE, EDGAR M
8190 WEST 26 AVENUE
MIAMI, FL 33016 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: EDGAR M. DUARTE

09/29/2006

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: DUARTE, EDGAR M
Address: 1000 PONCE DE LEON BLVD., #328
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DUARTE, THOMAS
Address: 8190 WEST 26 AVENUE
City-St-Zip: MIAMI, FL 33016

Title: VP () Change (X) Addition
Name: DUARTE, EDGAR M
Address: 8190 WEST 26 AVENUE
City-St-Zip: MIAMI, FL 33016

I hereby certify that the information supplied with this filing does not qualify for the 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: EDGAR M. DUARTE

VP

09/29/2006

Electronic Signature of Signing Officer or Director

Date