

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000064338

FILED  
Oct 21, 2008  
Secretary of State

Entity Name: B.I.P., INC.

**Current Principal Place of Business:**

8401 NW 70TH STREET  
MIAMI, FL 33166 US

**New Principal Place of Business:**

**Current Mailing Address:**

8401 NW 70TH STREET  
MIAMI, FL 33166 US

**New Mailing Address:**

FEI Number: 65-0873488

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAFFERTY, WILLIAM L JR.ESQ.  
1401 BRICKELL AVENUE  
SUITE 825  
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: DAVIDE CORTINOVIS

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: BRUNO, CLAIRE  
Address: 8401 NW 70TH STREET  
City-St-Zip: MIAMI, FL 33166 US

Title: VD ( ) Delete  
Name: FRANCHINA, ROBERTO  
Address: 8401 NW 70TH STREET  
City-St-Zip: MIAMI, FL 33166 US

Title: D ( ) Delete  
Name: BRAMBILLA, ATTILIO  
Address: 8401 NW 70TH STREET  
City-St-Zip: MIAMI, FL 33166 US

Title: D ( ) Delete  
Name: CORTINOVIS, DAVIDE  
Address: 8401 NW 70TH STREET  
City-St-Zip: MIAMI, FL 33166 US

**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:

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: DAVIDE CORTINOVIS

D

10/21/2008

Electronic Signature of Signing Officer or Director

Date