

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED  
AND  
FILED

05 OCT 14 PM 1:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F93000005808

1. Entity Name  
PORTOBELLO AMERICA INC.



Principal Place of Business  
1205 N MILLER  
ANAHEIM, CA 92806

Mailing Address  
1205 N MILLER  
ANAHEIM, CA 92806

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10132005 REIN-P CR2E098 (6/04)

4. FEI Number  
06-1299145

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/13/05

FILE NOW!!! FEE IS \$150.00

After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE COB ☐ Delete  
NAME GOMES, CESAR  
STREET ADDRESS RUA ANTONIO DIB MUSSI, 79  
CITY-ST-ZIP 88015.110 FLORIANOPOLIS SC,

TITLE CEOD ☐ Delete  
NAME STREADBECK, BRIAN  
STREET ADDRESS 9521 MARY CIRCLE  
CITY-ST-ZIP VILLA PARK, CA 92861

TITLE D ☐ Delete  
NAME BAPTISTA, MARIO  
STREET ADDRESS RUA ANTONIO DIB MUSSI, 79  
CITY-ST-ZIP 88015.110 FLORIANOPOLIS,

TITLE VPS ☐ Delete  
NAME PEREIRA, PAULO  
STREET ADDRESS 8 GRECO AISLE  
CITY-ST-ZIP IRVINE, CA 92614

TITLE D ☐ Delete  
NAME CORTE, GLAUCO  
STREET ADDRESS RUA CAP ROMMALES DE BARROS 705  
CITY-ST-ZIP CASA 28 CARVOEIRA,

TITLE V ☐ Delete  
NAME SCHEIBE, MAURICIO  
STREET ADDRESS 104 HERITAGE BLVD, UNIT 6  
CITY-ST-ZIP PRINCETON, NJ 08540

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TREASURER ☐ Change ☒ Addition  
NAME GLADIMIR BRZEZINSKI  
STREET ADDRESS 1205 N. Miller Street  
CITY-ST-ZIP Anaheim, CA 92806

TITLE VICE PRESIDENT ☐ Change ☒ Addition  
NAME DECIO MAGNANI  
STREET ADDRESS 2939 NORTH POWERLINE RD  
CITY-ST-ZIP POMPAHO BCH, FL 33069

TITLE DIRECTOR ☐ Change ☒ Addition  
NAME VALERIO GOMES NETO  
STREET ADDRESS RUA ANTONIO DIB MUSSI, 366  
CITY-ST-ZIP FLORIANOPOLIS, SC BRAZIL

NAME 400060629684  
STREET ADDRESS 10/14/05--01060--008 \*\*150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/05

Date

(714)234-2844

Daytime Phone #

OCT 18 2005