

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000017035

Entity Name: MERAND GROUP, INC.

FILED  
Oct 10, 2008  
Secretary of State

## Current Principal Place of Business:

20335 BISCAYNE BOULEVARD  
SUITE L-10  
AVENTURA, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

20335 BISCAYNE BOULEVARD  
SUITE L-10  
AVENTURA, FL 33180

## New Mailing Address:

FEI Number: 57-1150792      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

RODRIGUEZ, HERNAN J CEO  
765 CRANDON BLV.  
APTO 605  
KEY BISCAYNE, FL 33149 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: HERNAN RODRIGUEZ

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VICE ( ) Delete  
Name: RODRIGUEZ, HERNAN J MR.  
Address: 765 CRANDON BLV. APTO 605  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VICE ( ) Delete  
Name: FUENTES, ANDRES A MR.  
Address: 1122 CRANDON BLV. APTO E303 THE TOWERS  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PRES ( ) Delete  
Name: FUENTES, LESLIE A MS.  
Address: 765 CRANDON BLV. APTO 605  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: DIRE ( ) Delete  
Name: FUENTES ANGARITA, MERCEDES DIRECTO  
Address: 791 CRANDON BLV. APTO 1002  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TRE (X) Change ( ) Addition  
Name: RODRIGUEZ, HERNAN J MR.  
Address: 765 CRANDON BLV. APTO 605  
City-St-Zip: KEY BISCAYNE, FL 33149

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: LESLIE FUENTES

PRES

10/10/2008

Electronic Signature of Signing Officer or Director

Date