2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000132373

FILED Nov 05, 2008 Secretary of State

Entity Na	me: GOLD & BELL, INC.		
Current Principal Place of Business: 2030 S. DOUGLAS ROAD, UNIT 109 CORAL GABLES, FL 33134 Current Mailing Address:		New Principal Place of Business:	
		800 BRICKELL AVENUE 701 MIAMI, FL 33131	
		New Mailing Address:	
	OUGLAS ROAD, UNIT 109 ABLES, FL 33134		
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X) Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
CFRA, LLC 4221 W. BOY SCOUT BLVD., SUITE 1000 TAMPA, FL 33607 US		LAW OFFICE OF KRAVITZ & GUERRA, P.A. 800 BRICKELL AVENUE 701 MIAMI, FL 33131 US	
	named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, or both,	
SIGNATUI	RE: GENILDE GUERRA	11/05/2008	
	Electronic Signature of Registered A	Agent Date	
	ce with s. 607.193(2)(b), F.S., the corporation did mpaign Financing Trust Fund Contribution ().	not receive the prior notice.	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete BELLINO, RICARDO R A1. DAS SIBIPIRUNAS,1299,PORTARIA I-VILLE CHAMONIX, ITATIBA-BRAZIL SP, 13257610	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	D () Delete GOLDSTEIN, RICARDO SAMUEL RUA PRUDENTE DE MORALS,1259,APT. 401 IPANEMA-RIO DE JANIERO-RJ, 22420043	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	D () Delete AMARAL, WELLINGTON JR AVENIDA CATUAXI,222,APT.#804 SM ALPHAVILLE-BARUERI SP,BRAZIL, 06454941	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	() Delete	Title: D () Change (X) Addition Name: HORMANN, WALTER Address: 1200 BRICKELL BAY DRIVE, 3308 City-St-Zip: MIAMI, FL 33131	

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: WALTER HORMANN D 11/05/2008