I hereby 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 all other like empowered.

SIGNATURE: FRANCISCO VOLPE PRE

Electronic Signature of Signing Officer/Director Detail

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000084639

Entity Name: REPASCEN INTERNATIONAL CORPORATION

Current Principal Place of Business:

2775 NW 82 AVENUE DORAL, FL 33122

Current Mailing Address:

PAKMAIL 13055 POST OFFICE BOX 025304 MIAMI, FL 33102

FEI Number: 02-0723798

Name and Address of Current Registered Agent:

VOLPE, FRANCISCO 2775 NW 82 AVENUE DORAL, FL 33122 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:

Officer/Director Detail :

Title	PRE	Title	VPT
Name	VOLPE, FRANCISCO J	Name	ACEDO DE VOLPE, MARIA C
Address	2775 NW 82 AVENUE	Address	2775 NW 82 AVENUE
City-State-Zip:	DORAL FL 33122	City-State-Zip:	DORAL FL 33122

Date Electronic Signature of Registered Agent

FILED Feb 01, 2013 Secretary of State CC9300148073

Certificate of Status Desired: No

02/01/2013 Date