

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 247200

FILED
Feb 24, 2007
Secretary of State

Entity Name: RON MATUSALEM & MATUSA OF FLORIDA, INC.

Current Principal Place of Business:

230 PARK AVE.
NEW YORK, NY 10169 US

New Principal Place of Business:

230 PARK AVE.
SUITE 812
NEW YORK, NY 10169 US

Current Mailing Address:

230 PARK AVE.
NEW YORK, NY 10169 US

New Mailing Address:

230 PARK AVE.
SUITE 812
NEW YORK, NY 10169 US

FEI Number: 59-0997405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

ARANA, CARLOS
90 ALTON ROAD
APT. 2806
MIAMI, FL 33139 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: CARLOS ARANA

02/24/2007

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: ALVAREZ, CLAUDIO I
Address: 1205 SW 37TH AVE, STE 300
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: CHAPLIN, WAYNE E
Address: 1205 SW 37TH AVE, STE 300
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: ALVAREZ, CLAUDIO R
Address: 1205 SW 37TH AVE, STE 300
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: MARISCAL ESTRADA, CRISTOPAL
Address: 1205 SW 37TH AVE, STE 300
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: SILVA JAUREQUI, ANTONIO
Address: 1205 SW 37TH AVE, STE 300
City-St-Zip: MIAMI, FL 33135

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CARLOS ARANA

D

02/24/2007

Electronic Signature of Signing Officer or Director

Date