

**2007 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 02, 2007  
Secretary of State**

DOCUMENT# F01000004776

Entity Name: BELL & ROSS INC.

**Current Principal Place of Business:**

1688 MERIDIAN AVE  
504  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

1688 MERIDIAN AVE  
504  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 13-4187833      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HARRISON, LISA  
1688 MERIDIAN AVE  
STE 504  
MIAMI BEACH, FL 33139 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: LISA HARRISON

\_\_\_\_\_  
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: P ( ) Delete  
Name: ROSILLO, CARLOS  
Address: 340, RUE SAINT HONORE  
City-St-Zip: 75001 PARIS, FRANCE, 75001

Title: VD ( ) Delete  
Name: BELLAMICH, BRUNO  
Address: 340, RUE SAINT HONORE  
City-St-Zip: 75001 PARIS, FRANCE, 75001

Title: S ( ) Delete  
Name: HARRISON, LISA  
Address: 1688 MERIDIAN AVE., SUITE 504  
City-St-Zip: MIAMI BEACH, FL 33139

Title: T ( ) Delete  
Name: SAUMOY, FRANCISCO  
Address: 9 WEST 57TH STREET, 45TH FLOOR  
City-St-Zip: NEW YORK, NY 10019

Title: CD ( ) Delete  
Name: HEILBRON, CHARLES  
Address: 9 WEST 57TH STREET, 44TH FLOOR  
City-St-Zip: NEW YORK, NY 10019

**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 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: LISA HARRISON

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

S

10/02/2007

\_\_\_\_\_  
Date