

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000007438

FILED
Jan 29, 2009
Secretary of State

Entity Name: CAPE TECHNOLOGIES AMERICAS INC.

Current Principal Place of Business:

1111 BRICKELL AVENUE, SUITE 1133
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1111 BRICKELL AVENUE, SUITE 1133
MIAMI, FL 33131

New Mailing Address:

951 YAMATO ROAD
200W
BOCA RATON, FL 33431

FEI Number: 20-5739338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: ANTONIO LAGARINHOS

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: DPS () Delete
Name: SHARPE, PHILIP
Address: 1111 BRICKELL AVENUE, SUITE 1133
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: ADAMS, MICHAEL
Address: 1111 BRICKELL AVENUE, SUITE 1133
City-St-Zip: MIAMI, FL 33131

Title: T () Delete
Name: RYAN, STEPHEN
Address: 1111 BRICKELL AVENUE, SUITE 1133
City-St-Zip: MIAMI, FL 33131

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:

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: ANTONIO LAGARINHOS

FIN

01/29/2009

Electronic Signature of Signing Officer or Director

Date