2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# K69842

Entity Name: RYBRITT, INC.

FILED Jul 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8804 S.W. 129 STREET 24460 S.W.194 AVE MIAMI, FL 33176 HOMESTEAD, FL 33030

Current Mailing Address: New Mailing Address:

24460 SW 194 AVE 24460 S.W. 194 AVE. HOMESTEAD, FL 33031 HOMESTEAD, FL 33030

FEI Number: 65-0127563 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

AARON, SANDRA

8804 SW 129 STREET

MIAMI, FL 33176 US

CLARK, TIMOTHY J

20340 BEL AIRE DR.

CUTLER BAY, FL 33189 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: TIMOTHY J. CLARK 07/21/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition AARON, ROY S. AARON, ROY STRES Name: Name: 8804 SW 129 ST 24460 S.W. 194 AVE. Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: HOMESTEAD, FL 33030

Title: V (X) Delete Title: () Change () Addition

 Name:
 AARON, SANDRA
 Name:

 Address:
 8804 SW 129 ST.
 Address:

 City-St-Zip:
 MIAMI, FL 33176
 City-St-Zip:

Title: T (X) Delete Title: () Change () Addition

 Name:
 RIVERA, GREGORY
 Name:

 Address:
 1708 HAYES STREET, APT #1
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33020
 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: ROY AARON PRES 07/21/2009