

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L05181

Entity Name: BRU MED TRAVEL INC.

FILED
Oct 04, 2007
Secretary of State

Current Principal Place of Business:

6557 CORAL WAY
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

6557 CORAL WAY
MIAMI, FL 33155 US

New Mailing Address:

FEI Number: 65-0134946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNA, ROSA
2701 SW 143RD AVENUE
MIAMI, FL 33175 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: ROSA BRUNA

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: BRUNA, FRANCISCO,
Address: 2701 SW 143RD AVENUE
City-St-Zip: MIAMI, FL 33175

Title: TD () Delete
Name: BRUNA, ROSA H.,
Address: 1072 SW 25 AVE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: BRUNA, ROSA H.,
Address: 2701 SW 143RD AVE
City-St-Zip: MIAMI, FL 33175

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: FRANCISCO BRUNA

PD

10/04/2007

Electronic Signature of Signing Officer or Director

Date