

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# L57264

Entity Name: AMAVI, INC.

FILED
Jan 05, 2007
Secretary of State

Current Principal Place of Business:

8430 SOUTHWEST 15 TERRACE
MIAMI, FL 33144

New Principal Place of Business:

2600 DOUGLAS RD.
SUITE 1100
CORAL GABLES, FL 33134

Current Mailing Address:

7622 SW 129 PLACE
MIAMI, FL 33183

New Mailing Address:

2600 DOUGLAS RD.
SUITE 1100
CORAL GABLES, FL 33134

FEI Number: 65-0194039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORENO, CLAUDIA A
7622 SW 129 PLACE
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

GURIAN, JORGE
2600 DOUGLAS RD.
SUITE 1100
CORAL GABLES, FL 33134 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: JORGE GURIAN

01/05/2007

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: DE BLUM, MARICEL G
Address: 8430 SW 15 TERRACE
City-St-Zip: MIAMI, FL 33144

Title: VPSD () Delete
Name: BLUM, ALICE
Address: 8430 SW 15 TERRACE
City-St-Zip: MIAMI, FL 33144

Title: D () Delete
Name: BLUM, M. VIVIAN
Address: 8430 SW 15 TERRACE
City-St-Zip: MIAMI, FL 33144

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DE BLUM, MARICEL
Address: 2600 DOUGLAS RD. SUITE 1100
City-St-Zip: CORAL GABLES, FL 33134

Title: VPSD (X) Change () Addition
Name: BLUM, ALICE
Address: 2600 DOUGLAS RD. SUITE 1100
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change () Addition
Name: BLUM, M. VIVIAN
Address: 2600 DOUGLAS RD. SUITE 1100
City-St-Zip: CORAL GABLES, FL 33134

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: MARICEL DE BLUM

PD

01/05/2007

Electronic Signature of Signing Officer or Director

Date