

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000009168

FILED  
Aug 30, 2006  
Secretary of State

Entity Name: NATURAL MOTION SYSTEMS INC.

## Current Principal Place of Business:

18200 JAMES AVE 2B  
MIAMI BEACH, FL 331397924

## New Principal Place of Business:

2799 SW 33 CT  
MIAMI, FL 33133

## Current Mailing Address:

18200 JAMES AVE 2B  
MIAMI BEACH, FL 331397924

## New Mailing Address:

2799 SW 33 CT  
MIAMI, FL 33133

FEI Number: 75-3174413      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

VALIDO, FELIX M  
18200 JAMES AVE 2B  
MIAMI BEACH, FL 331397924 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: FELIX VALIDO

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: TARRAGO, ELIO  
Address: 2799 SW 33TH COURT  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: TARRAGO, EUGENIA  
Address: 2799 SW 33TH COURT  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: YANIZ, JUANA  
Address: 2799 SW 33TH COURT  
City-St-Zip: MIAMI, FL 33133

## 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIO TARRAGO

D

08/30/2006

Electronic Signature of Signing Officer or Director

Date