

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000000245

FILED
Feb 14, 2009
Secretary of State

Entity Name: BRAZILIAN AMERICAN BAR ASSOCIATION CORP.

Current Principal Place of Business:

201 ALHAMBRA CIRCLE, STE. 1102
CORAL GABLES, FL 33134

New Principal Place of Business:

9155 S DADELAND BLVD
SUITE 1208
MIAMI, FL 33156

Current Mailing Address:

201 ALHAMBRA CIRCLE, STE. 1102
CORAL GABLES, FL 33134

New Mailing Address:

9155 S DADELAND BLVD
SUITE 1208
MIAMI, FL 33156

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

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIRCLE, STE. 1102
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

BARBOSA, JULIO C ESQ
9155 S DADELAND BLVD
SUITE 1208
MIAMI, FL 33156 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: JULIO C BARBOSA

02/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RODGERS-DA-CRUZ, JASON
Address: 201 ALHAMBRA CIRCLE, STE. 1102
City-St-Zip: CORAL GABLES, FL 33134

Title: DV () Delete
Name: MONTZ, VIVIEN
Address: 201 ALHAMBRA CIRCLE, STE. 1102
City-St-Zip: CORAL GABLES, FL 33134

Title: DS () Delete
Name: ISHOOF, SAIF
Address: 11450 SW 60TH AVE.
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BARBOSA, JULIO C
Address: 9155 S DADELAND BLVD., SUITE 1208
City-St-Zip: MIAMI, FL 33156

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

SIGNATURE: JULIO C BARBOSA

DP

02/14/2009

Electronic Signature of Signing Officer or Director

Date