2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 26, 2009
Secretary of State

DOCUMENT# P00000023449

Entity Name: COMPLIMENTI, INC.

Current Principal Place of Business:

602 NW 98 COURT
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

602 NW 98 COURT
MIAMI, FL 33172

New Mailing Address:

FEI Number: 65-1077451 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FIGUEROA, RONALDO R CPA
6401 S.W. 87 AVE, STE. 202
MIAMI, FL 33173 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: RONALDO R. FIGUEROA, CPA
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: ANOR, NURIA
Address: 602 NW 98 COURT
City-St-Zip: MIAMI, FL 33172

Title: SD ( ) Delete
Name: DE ANOR, NURIA
Address: 602 NW 98 COURT
City-St-Zip: MIAMI, FL 33172

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: MD ( ) Change (X) Addition
Name: BERTONATTI, CARLOS A
Address: 600 GRAPETREE DRIVE, APT 9ES
City-St-Zip: KEY BISCAYNE, FL 33149

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: NURIA ANOR PD 10/26/2009
Electronic Signature of Signing Officer or Director Date