2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000068217

Entity Name: EXPANSION DIGITAL, INC.

FILED Sep 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3967 NW 122 TERRACE SUNRISE, FL 33323 **Current Mailing Address: New Mailing Address:** 3967 NW 122 TERRACE SUNRISE, FL 33323 FEI Number: 65-1025580 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAVERA, BERNARDO 3967 NW 122 TERRACE SUNRISE, FL 33323 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: BERNARDO TAVERA 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TAVERA CASTILLO, MARIA CRISTINA Name: Name: 536 BILTMORE WAY Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: DV Title: () Delete () Change () Addition VARGAS DE ESPINAL, GLORIA INES Name: Name: 536 BILTMORE WAY Address: Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition TAVERA CASTILLO, ADRIANA Name: Name: 536 BILTMORE WAY Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BERNARDO TAVERA MR 09/24/2006

TAVERA GAITSKELL, BERNARDO

536 BILTMORE WAY

CORAL GABLES, FL 33134

Name:

Address:

City-St-Zip: