2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000021792

P.O. BOX 2036

QUITO, EQUADOR,

Address:

City-St-Zip:

Entity Name: FRIDACAR, INC

FILED May 19, 2009 Secretary of State

	mer Trabaco	ι, πνο.			
Current P	rincipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
ONE S.E. THIRD AVENUE 15TH FLOOR MIAMI, FL 33131			1198 VENETIAN W SUITE 108 MIAMI, FL 33139	/AY	
Current N	lailing Addres	s:	New Mailing Add	New Mailing Address:	
P O BOX 403818 MIAMI BEACH, FL 331401818 US			1198 VENETIAN W SUITE 108 MIAMI, FL 33139		
FEI Number	: 65-1130594	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
MARTIN, FRANCISCO J ONE S.E. THIRD AVENUE 15TH FLOOR MIAMI, FL 33131 US			RIVERA, LUISA 1198 VENETIAN W SUITE 108 MIAMI, FL 33139		
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: LUISA RIVERA				05/19/2009	
	Electron	ic Signature of Registered Ag	ent	Date	
		8(2)(b), F.S., the corporation did no Trust Fund Contribution ().	ot receive the prior notice.		
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHAI	NGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () DELLER, ALBE P.O. BOX 2036 QUITO, EQUAD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DELLER, FRIDA P.O. BOX 2036 QUITO, EQUAD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DELLER, MICH P.O. BOX 2036 QUITO, EQUAD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () DE BEITSCH D	Delete ELLER, HELEN	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ALBERTO DELLER PRES 05/19/2009