2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000034042

Entity Name: TECHNOMAQ INC.

FILED Sep 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8996 NORTHWEST 105TH WAY 6625 MIAMI LAKES DR E MIAMI, FL 33178 222

MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

8996 NORTHWEST 105TH WAY MIAMI, FL 33178

FEI Number: 65-1091085 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:

SPIEGEL & UTRERA, P.A.

343 ALMERIA AVENUE

CORAL GABLES, FL 33134 US

ESQUEDA, ENNA M
6625 MIAMI LAKES DR
222

MIAMI LAKES, FL 33014 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: ENNA M ESQUEDA 09/26/2007

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: PST () Delete Title: PST (X) Change () Addition

 Name:
 ESQUEDA, ENNA M
 Name:
 ESQUEDA, LUIS G

 Address:
 8996 NORTHWEST 105TH WAY
 Address:
 6625 MIAMI LAKES DR E

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 MIAMI LAKES, FL 33014

Title: () Delete Title: VPST () Change (X) Addition

 Name:
 Name:
 ESQUEDA, LUÍS G

 Address:
 Address:
 6625 MIAMI LAKES DR E

 City-St-Zip:
 City-St-Zip:
 MIAMI LAKES, FL 33014

Title: () Delete Title: TRSR () Change (X) Addition

 Name:
 Name:
 ESQUEDA, LÚÍS G

 Address:
 Address:
 6625 MIAMI LAKES DR E

 City-St-Zip:
 City-St-Zip:
 MIAMI LAKES, FL 33014

Title: () Delete Title: SCRY () Change (X) Addition

 Name:
 Name:
 ESQUEDA, LUIS G

 Address:
 Address:
 6625 MIAM LAKES DR E

 City-St-Zip:
 City-St-Zip:
 MIAMI LAKES, FL 33014

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: LUIS G ESQUEDA PST 09/26/2007