

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000050027

Entity Name: SM STUDIO, INC.

FILED
Nov 29, 2005
Secretary of State

Current Principal Place of Business:

4160 HARDIE RD
CORAL GABLES, FL 33134 US

New Principal Place of Business:

4160 HARDIE AVENUE
MIAMI, FL 33133 US

Current Mailing Address:

1400 SALZEDO STREET #TH2
CORAL GABLES, FL 33134 US

New Mailing Address:

4160 HARDIE AVENUE
MIAMI, FL 33133 US

FEI Number: 94-3399968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANNARINI, GILLES MR.
1400 SALZEDO STREET #TH2
CORAL GABLES, FL 33138 US

Name and Address of New Registered Agent:

MANNARINI, GILLES MR.
4160 HARDIE AVENUE
MIAMI, FL 33133 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: MANNARINI GILLES

11/29/2005

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: P () Delete
Name: MANNARINI, GILLES MR.
Address: 1400 SALZEDO STREET #TH2
City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete
Name: MANNARINI PETITPAS, SOPHIE MRS.
Address: 1400 SALZEDO STREET #TH2
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MANNARINI, GILLES MR.
Address: 4160 HARDIE AVENUE
City-St-Zip: MIAMI, FL 33133

Title: V (X) Change () Addition
Name: MANNARINI PETITPAS, SOPHIE MRS.
Address: 4160 HARDIE AVENUE
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANNARINI GILLES

P

11/29/2005

Electronic Signature of Signing Officer or Director

Date