

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P01000066682					
1. Entity Name INIGO ENTERPRISES USA CORP.					
Principal Place of Business 9601 SW 15TH ST MIAMI, FL 33174			Mailing Address 9601 SW 15TH ST MIAMI, FL 33174		
2. Principal Place of Business <i>8813 NW 114 Terrace</i>		3. Mailing Address <i>SAME</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <i>Hialeah, FL</i>		City & State		4. FEI Number 65-1124721	
Zip <i>33018</i>		Country <i>E.E.U.U.</i>		Applied For <input type="checkbox"/> Not Applicable	
Zip <i>33018</i>		Country <i>E.E.U.U.</i>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  INIGO, NELSON 1454 NW 115TH ST. MIAMI, FL 33181			7. Name and Address of New Registered Agent Name <i>TAIMY GAMAYO</i> Street Address (P.O. Box Number is Not Acceptable) <i>3066 SW 129 PLACE</i> City <i>MIRAMOR, FL</i> Zip Code <i>33027</i>		
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE: <i>Taimy Gamayo</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$300.00</b>			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GAMAYO, TAIMY 8813 NW 114TH TERRACE HIALEAH, FL 33018	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President TAIMY GAMAYO 3066 SW 129 PL MIRAMOR, FL 33027</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>200067946042 03/16/06--01006--035 **308.75</i> <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Taimy Gamayo</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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SECRET  
TALLAHASSEE, FL 32304



**REINSTATEMENT 05-06**  
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