

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000111112

Entity Name: YOYO USA, INC.

FILED  
Oct 06, 2005  
Secretary of State

## Current Principal Place of Business:

20326 NE 16TH PLACE  
NORTH MIAMI BEACH, FL 33179

## New Principal Place of Business:

## Current Mailing Address:

20326 NE 16TH PLACE  
NORTH MIAMI BEACH, FL 33179

## New Mailing Address:

FEI Number: 03-0122793

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DREZNER, MANUEL  
20326 NE 16TH PLACE  
NORTH MIAMI BEACH, FL 33179 US

## Name and Address of New Registered Agent:

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: SERGIO FAIGENBLAT

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: DP ( ) Delete  
Name: DREZNER, MANUEL  
Address: 20326 NE 16TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: DV ( ) Delete  
Name: DE DREZNER, EDITH SALANSKY  
Address: 20326 NE 16TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D ( ) Delete  
Name: SALANSKY, JAIME ENRIQUE D  
Address: 20326 NE 16TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D ( ) Delete  
Name: SALANSKY, EVELYN JABA D  
Address: 20326 NE 16TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: DS ( ) Delete  
Name: SALANSKY, DAVID ISRAEL D  
Address: 20326 NE 16TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SERGIO FAIGENBLAT

Electronic Signature of Signing Officer or Director

MANA

10/06/2005

Date