2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000111112

Entity Name: YOYO USA, INC.

FILED Oct 11, 2006 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:
	16TH PLACE IAMI BEACH, FL 33179	
Current M	lailing Address:	New Mailing Address:
	16TH PLACE IAMI BEACH, FL 33179	
FEI Number:	: 03-0122793 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered Agent	t: Name and Address of New Registered Agent:
20326 NE	R, MANUEL 16TH PLACE IAMI BEACH, FL 33179 US	
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE: MANUEL DREZNER	
	Electronic Signature of Registered	I Agent Date
	ce with s. 607.193(2)(b), F.S., the corporation on compaign Financing Trust Fund Contribution ().	-
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	DP () Delete DREZNER, MANUEL 20326 NE 16TH PLACE NORTH MIAMI BEACH, FL 33179	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DV () Delete DE DREZNER, EDITH SALANSKY 20326 NE 16TH PLACE NORTH MIAMI BEACH, FL 33179	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete SALANSKY, JAIME ENRIQUE D 20326 NE 16TH PLACE NORTH MIAMI BEACH, FL 33179	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete SALANSKY, EVELYN JABA D 20326 NE 16TH PLACE NORTH MIAMI BEACH, FL 33179	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DS () Delete SALANSKY, DAVID ISRAEL D 20326 NE 16TH PLACE NORTH MIAMI BEACH, FL 33179	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 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: SERGIO FAIGENBLAT O 10/11/2006