## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P01000111960

Entity Name: V. GRAPHICS, INC.

FILED Oct 09, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1571 BIRD ROAD 3537 NW 82 AVENUE CORAL GABLES, FL 33136 DORAL, FL 33122

Current Mailing Address: New Mailing Address:

 1571 BIRD ROAD
 5228 S STATE ROAD 7

 CORAL GABLES, FL 33136
 DAVIE, FL 33314

FEI Number: 65-1154537 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:

MENENDEZ, CHARLES A
1571 BIRD ROAD
CORAL GABLES, FL 33136 US
PILATO, SEBASTIAN
5228 S STATE ROAD 7
DAVIE, FL 33314 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: SEBASTIAN PILATO 10/09/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

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

Name:MELMAN, GUSTAVO ELIASName:MELMAN, GUSTAVO ELIASAddress:AV ALICIA MOREAU DE JUSTOAddress:MEXICO 2053 (1212)

City-St-Zip: 1780 3 FLOOR 1107 ARGENTINA, OC City-St-Zip: BUENOS AIRES, ARGENTINA, CF AR

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition
Name: MELMAN HORACIO Name: MELMAN HORACIO

Name: MELMAN, HORACIO Name: MELMAN, HORACIO
Address: AV ALICIA MOREAU DE JUSTO Address: MEXICO 2053 (1212)

City-St-Zip: 1780 3 FLOOR 1107 ARGENTINA, OC City-St-Zip: BUENOS AIRES, ARGENTINA, CF AR

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

 Name:
 MENENDEZ, CHARLES A
 Name:

 Address:
 1571 BIRD ROAD
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33136
 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: GUSTAVO ELIAS MELMAN PD 10/09/2006