2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000001642

Entity Name: BUENOS AIRES DESIGN, INC.

FILED May 26, 2005 Secretary of State

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

10190 BAY HARBOR DRIVE 945 NE 120 STREET

SUITE #10-F NORTH MIAMI, FL 33161 US MIAMI BEACH, FL 33154 US

Current Mailing Address: New Mailing Address:

1098 BONITA DRIVE 945 NE 120 STREET

MIAMI BEACH, FL 33141 US NORTH MIAMI, FL 33161 US

FEI Number: 03-0379788 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:

TRULLENQUE, ANTHONY L ESQ
7098 BONITA DR
ACUNA, HUGO O
945 NE 120 STREET

MIAMI BEACH, FL 33141 US NORTH MIAMI, FL 33161 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: HUGO O ACUNA 05/26/2005

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT () Delete Title: PSD (X) Change () Addition Name: ACUNA, HUGO OSVALDO Name: ACUNA, HUGO O

 Address:
 10190 BAY HARBOR DRIVE # 10-F
 Address:
 945 NE 120TH STREET

 City-St-Zip:
 MIAMI BEACH, FL 33154
 City-St-Zip:
 NORTH MIAMI, FL 33161

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

 Name:
 ACUNA, LEONARDO A
 Name:

 Address:
 10190 BAY HARBOR DRIVE # 10-F
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33154
 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: HUGO O ACUNA PSD 05/26/2005