

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000026070

Entity Name: CRISTIAN LAY, INC.

FILED
Oct 17, 2005
Secretary of State

Current Principal Place of Business:

506 BILTMORE WAY
CORAL GABLES, FL 33134

New Principal Place of Business:

3900 N. W. 79 AVENUE
312
DORAL, FL 33166 US

Current Mailing Address:

506 BILTMORE WAY
CORAL GABLES, FL 33134

New Mailing Address:

3900 N. W. 79 AVENUE
312
DORAL, FL 33166 US

FEI Number: 20-1593678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA-LINARES, MANUEL A
201 S. BISCAYNE BLVD.
MIAMI CENTER, 10TH FLOOR
MIAMI, FL 33131 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: MANUEL A. GARCIA-LINARES

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: P () Delete
Name: CORDOBES, RICARDO LEAL
Address: CARRETERA BADAJOZ 06380 JEREZ DE LOS
City-St-Zip: CABALLEROS BADAJOZ SPAIN,

Title: VPS (X) Delete
Name: RODRIGUEZ, JOSE MANUEL
Address: 506 BILTMORE WAY
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: CORDOBES, RICARDO LEAL
Address: CARRETERA BADAJOZ 06380 JEREZ DE LOS
City-St-Zip: CABALLEROS BADAJOZ , SPAIN, SP

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: RICHARDO LEAL CORDOBES

P/S

10/17/2005

Electronic Signature of Signing Officer or Director

Date