# 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P02000038298

Entity Name: DURAMAX INTERNATIONAL GROUP, INC.

**FILED** Apr 23, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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10249 NW 51 LANE 18501 PINES BLVD MIAMI, FL 33178

SUITE 201

PEMBROKE PINES, FL 33029

**Current Mailing Address:** New Mailing Address:

8075 SW 107TH AVE 18501 PINES BLVD

SUITE 201

PEMBROKE PINES, FL 33029

FEI Number: 20-2269536 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:

ABAD, WLADIMIR GBS CONSULTANTS, INC 18501 PINES BLVD 8075 SW 107TH AVE SUITE 201 109

MIAMI, FL 33173 US PEMBROKE PINES, FL 33029 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: JORGE E FERNANDEZ 04/23/2009

> 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:**

MIAMI, FL 33178

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

VIERA, FRANCOISE VIERA, FRANCOISE Name: Name: 10249 NW 51 LANE 185 SE 14TH TERRACE UNIT 1906 Address: Address:

City-St-Zip: MAIMI, FL 33178 City-St-Zip: MIAMI, FL 33131

Title: Title: **VPS** (X) Change ( ) Addition () Delete

VIERA, FRANCOISE Name: Name: RODRIGUEZ, FELIPE

10249 NW 51 LANE 185 SE 14TH TERRACE UNIT 1906 Address: Address: MIAMI, FL 33178 MIAMI, FL 33131

City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition VIERA, MARTA Name: Name:

10249 NW 51 LANE Address: Address: City-St-Zip: MIAMI, FL 33178 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: FRANCOISE VIERA 04/23/2009