2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jul 01, 2008
Secretary of State

DOCUMENT# P02000044365

Entity Name: INTERNATIONAL BUSINESS MANAGEMENT CONSULTANTS,INC.

Current Principal Place of Business:

P.O. BOX 720242
MIAMI, FL 331720006

New Principal Place of Business:

500 BAY VIEW DRIVE
SUITE 220
SUNNY ISLES, FL 331604748 US

Current Mailing Address:

P.O. BOX 720242
MIAMI, FL 331720006

New Mailing Address:

500 BAY VIEW DRIVE
SUITE 220
SUNNY ISLES, FL 331604748 US

FEI Number: 01-0607099 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SOSA, MANUEL A
PO BOX 720242
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

MINONES, CLAUDIO A SENIOR
500 BAY VIEW DRIVE
SUITE 220
SUNNY ISLES BEACH, FL 33160 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: CLAUDIO, MINONES 07/01/2008
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: D ( ) Delete
Name: SOSA, MANUEL A
Address: P.O. BOX 720242
City-St-Zip: MIAMI, FL 33172

Title: D (X) Delete
Name: SOSA, MARTHA E
Address: P.O. BOX 720242
City-St-Zip: MIAMI, FL 33172

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: MINONES, CLAUDIO A SENIOR
Address: 500 BAYVIEW DRIVE SUITE 220
City-St-Zip: SUNNY ISLES BEACH, FL 33172

Title: ( ) Change ( ) Addition
Name:
Address:
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.

SIGNATURE: CLAUDIO ALBERTO MINONES CEO 07/01/2008
Electronic Signature of Signing Officer or Director Date