2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000049697

Entity Name: BIVE CORPORATION

FILED Nov 30, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 2951 EAST 9TH AVENUE
 499 WEST 23RD ST

 HIALEAH, FL 33013
 HIALEAH, FL 33010

Current Mailing Address: New Mailing Address:

 2951 EAST 9TH AVENUE
 499 WEST 23RD ST

 HIALEAH, FL 33013
 HIALEAH, FL 33010

FEI Number: 54-2069009 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:

CAMACHO, CESAR R ESQ. VERA, CLEMENTE 240 EAST FLAGLER STREET 499 WEST 23RD ST MIAMI, FL 33131 US HIALEAH, FL 33010 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: CLEMENTE VERA 11/30/2004

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:

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

 Name:
 VERA, CLEMENTE
 Name:
 VERA, CLEMENTE

 Address:
 2951 EAST 9TH AVENUE
 Address:
 499 WEST 23RD ST

 City-St-Zip:
 HIALEAH, FL 33013
 City-St-Zip:
 HIALEAH, FL 33010

Title: VSD () Delete Title: () Change () Addition

 Name:
 BIBOLINI, GIORGIO
 Name:

 Address:
 755 CURTISSWOOD DRIVE
 Address:

 City-St-Zip:
 KEY BISCAYNE, FL 33149
 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: CLEMENTE VERA PD 11/30/2004