

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000072048

FILED
Oct 16, 2007
Secretary of State

Entity Name: MEGAZINES PUBLICATIONS CORP.

Current Principal Place of Business:

6920 NW 46 STREET
MIAMI, FL 33166

New Principal Place of Business:

6355 NORTHWEST 36TH STREET
SUITE 201
MIAMI, FL 33166

Current Mailing Address:

6920 NW 46 STREET
MIAMI, FL 33166

New Mailing Address:

6355 NORTHWEST 36TH STREET
SUITE 201
MIAMI, FL 33166

FEI Number: 01-0732349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, REINALDO
1241 CAMELLIA CIRCLE
WESTON, FL 33326 US

Name and Address of New Registered Agent:

FLOREZ, JAIME
4429 NW 97TH PLACE
MIAMI, FL 33178 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: JAIME FLOREZ

10/16/2007

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: ACOSTA, REINALDO
Address: 1241 CAMELLIA CIRCLE
City-St-Zip: WESTON, FL 33326

Title: VP () Delete
Name: SROKA, ROBERTO
Address: 7048 NW 107TH PLACE
City-St-Zip: MIAMI, FL 33178

Title: VP () Delete
Name: STEFANUTTI, EMIL
Address: 7738 NW 113TH PATH
City-St-Zip: MIAMI, FL 33178

Title: ST (X) Delete
Name: FLOREZ, JAIME
Address: 4429 NW 97TH PL.
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: FLOREZ, JAIME
Address: 4429 NW 97TH PLACE
City-St-Zip: MIAMI, FL 33178

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: JAIME FLOREZ

ST

10/16/2007

Electronic Signature of Signing Officer or Director

Date