

**2005 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Sep 28, 2005  
Secretary of State**

DOCUMENT# P02000087299

Entity Name: LAUSIM INVESTMENTS, INC.

**Current Principal Place of Business:**

8105 NE 3RD AVE  
MIAMI, FL 33138

**New Principal Place of Business:**

P.O BOX 272  
NORTH MIAMI, FL 33168 02

**Current Mailing Address:**

8105 NE 3RD AVE  
MIAMI, FL 33138

**New Mailing Address:**

P.O BOX 272  
NORTH MIAMI, FL 33168 02

FEI Number: 26-7978698      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KELLEY, CHRISTOPHER P  
11098 BISCAYNE BOULEVARD  
SUITE 205  
MIAMI, FL 33161 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: KELLEY CHRISTOPHER, P.

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: VANCOL, JEAN-SIMON  
Address: 190 N. 87TH STREET  
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete  
Name: CHARLEMAGNE-VANCOL, LAURA  
Address: 190 N. 87TH STREET  
City-St-Zip: MIAMI, FL 33150

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: LAURA CHARLEMAGNE-VANCOL

D

09/28/2005

Electronic Signature of Signing Officer or Director

Date