

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000091488

Entity Name: CONSEIN, INC.

FILED
Oct 26, 2007
Secretary of State

Current Principal Place of Business:

1920 EAST HALLANDALE BEACH BLVD.
SUITE 901
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

1920 EAST HALLANDALE BEACH BLVD.
SUITE 901
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 20-0863059

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENINSULA REGISTERED AGENTS, INC.
200 SOUTH BISCAYNE BLVD., 43RD FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

HOFFMAN, LEVY, BENGIO & CO., PL
2320 HOLLYWOOD BLVD
HOLLYWOOF, FL 33020 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: DANIEL BENGIO

10/26/2007

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: D () Delete
Name: SAIAS, EDUARDO
Address: 1920 EAST HALLANDALE BEACH BLVD.
City-St-Zip: HALLANDALE, FL 33009

Title: PD () Delete
Name: ESKENAZI, ARIE
Address: 1920 EAST HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: HERDAN, RICARDO
Address: 1920 EAST HALLANDALE BEACH
City-St-Zip: HALLANDALE, FL 33009

Title: VD () Delete
Name: PICON, ROBERTO
Address: 1920 EAST HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: ARIE ESKENAZI

PD

10/26/2007

Electronic Signature of Signing Officer or Director

Date