

**2009 FOR PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 06, 2009  
Secretary of State**

DOCUMENT# P02000126792

Entity Name: MASKA USA, INC.

**Current Principal Place of Business:**

4338 SW 183RD AVENUE  
MIRAMAR, FL 33029 US

**New Principal Place of Business:**

**Current Mailing Address:**

4338 SW 183RD AVENUE  
MIRAMAR, FL 33029 US

**New Mailing Address:**

FEI Number: 04-3735778      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MIKE'S TAX & ACCOUNTING, INC.  
269 N. UNIVERSITY DRIVE  
SUITE I  
PEMBROKE PINES, FL 33024 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: MICHAEL SARABJIT

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: DP ( ) Delete  
Name: RAMPERSAD, MUKESH  
Address: 4338 SW 183RD AVENUE  
City-St-Zip: MIRAMAR, FL 33029 US

Title: DV ( ) Delete  
Name: RAMPERSAD, SABITREE  
Address: 4338 SW 183RD AVENUE  
City-St-Zip: MIRAMAR, FL 33029 US

Title: DVP ( ) Delete  
Name: RAMPERSAD, ANIL  
Address: 4338 SW 183RD AVENUE  
City-St-Zip: MIRAMAR, FL 33029 US

**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:

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: MUKESH RAMPERSAD

P

10/06/2009

Electronic Signature of Signing Officer or Director

Date