## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000009110

**Entity Name: REA INTERNATIONAL INC.** 

FILED Sep 21, 2005 Secretary of State

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

2086 BOREALIS WAY 4466 BLOSSOM LANE WESTON, FL 33327 WESTON, FL 33331

Current Mailing Address: New Mailing Address:

2086 BOREALIS WAY 4466 BLOSSOM LANE WESTON, FL 33327 WESTON, FL 33331

FEI Number: 02-0690625 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:

GARCIA, LOUIS D SANDERS, BERTA M
13446 SW 62 ST 9550 NW 77TH AVENUE
MIAMI, FL US SUITE 3

HIALEAH GARDENS, FL 33016 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: BERTA M SANDERS 09/21/2005

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: ARCILA, RAFAEL E Name: ARCILA, RAFAEL E

Address: 2086 BOREALIS WAY Address: 4466 BLOOSOM LANE City-St-Zip: WESTON, FL 33327 City-St-Zip: WESTON, FL 33331

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

 Name:
 HERRERA, YENNY
 Name:
 HERRERA, YENNY

 Address:
 2086 BOREALIS WAY
 Address:
 4466 BLOSSOM LANE

 City-St-Zip:
 WESTON, FL 33327
 City-St-Zip:
 WESTON, FL 33331

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: RAFAEL E ARCILA D 09/21/2005