

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000013428 1. Entity Name P.S.M. INTERNATIONAL, CORP.					
Principal Place of Business 1140 W 50TH STREET #207 HIALEAH, FL 33012			Mailing Address 1140 W 50TH STREET #207 HIALEAH, FL 33012		
2. Principal Place of Business 8357 W. FLAGLER STREET Suite, Apt. #, etc. #350 City & State MIAMI - FLORIDA Zip FL-33144		3. Mailing Address 8357 W. FLAGLER STREET Suite, Apt. #, etc. #350 City & State MIAMI - FLORIDA Zip FL-33144			
4. FEI Number 76-0723698		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent JIMENO, FERNANDO 1140 W 50TH STREET #207 HIALEAH, FL 33012			7. Name and Address of New Registered Agent Name ARAZOZA and FERNANDEZ - FRAGA, P.A. Street Address (P.O. Box Number is Not Acceptable) 2100 SALZEDO Street, Suite 300 City Coral Gables FL Zip Code 33134		
8. I, the undersigned, hereby submit this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept as of registered agent. SIGNATURE: 3/16/05 <small>Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHAPARRO, ANNABELLA J CALLE EL RETIRO, AVENIDA CARABOBO #4-C CARACAS, VENEZUELA,	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JAIMES-CHAPARRO, ANNABELLA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CHAPARRO, CESAR J 4000 DE MAISONNEUVE WEST #815 MONTREAL, CANADA H3Z1J9,	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD JAIMES-CHAPARRO, CESAR 201 CHEMIN DU CLUB MARIN #1207 VERDUN QUEBEC CANADA H3E1T4	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	300052140413 04/26/05--01058--008 **750.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	REINSTATEMENT 04-08		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	REINSTATEMENT 04-08		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: CESAR JAIMES CHAPARRO			Date March 9th 2005 (514) 7626283		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03-1960490040 013150



03092005 REIN-P CR2E098 (6/04)

4. FEI Number 76-0723698 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
Name ARAZOSA and FERNANDEZ - FRAGA, P.A.
Street Address (P.O. Box Number is Not Acceptable)
2100 SALZEDO Street, Suite 300
City Coral Gables FL Zip Code 33134

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TITLE PD NAME CHAPARRO, ANNABELLA J STREET ADDRESS CALLE EL RETIRO, AVENIDA CARABOBO #4-C CITY-ST-ZIP CARACAS, VENEZUELA,	TITLE PD NAME JAIMES-CHAPARRO, ANNABELLA STREET ADDRESS CITY-ST-ZIP
TITLE VSD NAME CHAPARRO, CESAR J STREET ADDRESS 4000 DE MAISONNEUVE WEST #815 CITY-ST-ZIP MONTREAL, CANADA H3Z1J9,	TITLE VSD NAME JAIMES-CHAPARRO, CESAR STREET ADDRESS 201 CHEMIN DU CLUB MARIN #1207 CITY-ST-ZIP VERDUN QUEBEC CANADA H3E1T4
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

T. Roberts APR 21 2005