

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000028017

FILED
Jul 26, 2006
Secretary of State

Entity Name: SOLUCIONES ALTAVISTA, CORP

Current Principal Place of Business:

1550 BRICKELL AV. #202
MIAMI, FL 33129 US

New Principal Place of Business:

247 SW 8TH STREET
#288
MIAMI, FL 33130 US

Current Mailing Address:

1550 BRICKELL AV. #202
MIAMI, FL 33129 US

New Mailing Address:

247 SW 8TH STREET
#288
MIAMI, FL 33131 US

FEI Number: 51-0450037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GBS CONSULTANTS
1290 WESTON RD STE 306
WESTON, FL 33326 US

Name and Address of New Registered Agent:

LOPEZ, COSME E
1200 BRICKELL BAY DR
1702
MIAMI, FL 33131 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: COSME E LOPEZ

07/26/2006

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: PSD () Delete
Name: LOPEZ, LIGIA G
Address: 1550 BRICKELL AV #202
City-St-Zip: MIAMI, FL 33129 US

Title: VTD () Delete
Name: LOPEZ, CESAR E
Address: 1550 BRICKELL AV #202
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: LOPEZ, LIGIA G
Address: 247 SW 8TH STREET #288
City-St-Zip: MIAMI, FL 33130 US

Title: VTD (X) Change () Addition
Name: LOPEZ, LIGIA M
Address: 247 SW 8TH STREET #288
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information supplied with this filing does not qualify for the 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: LIGIA G LOPEZ

PSD

07/26/2006

Electronic Signature of Signing Officer or Director

Date