## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000043442

City-St-Zip:

SAN JUAN, PR 00919

FILED May 26, 2005 Secretary of State

Entity Na	me: DGROU	JP INVESTMENT (FL), INC.			
Current Principal Place of Business:			New Principal Pla	ace of Business:	
P.O. BOX SAN JUAN	192336 N, PR 00919				
Current Mailing Address:			New Mailing Add	ress:	
P.O. BOX SAN JUAN	192336 N, PR 00919				
FEI Number	: 66-0625651	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
LAW OFFICE OF CARLOS A. ROMERO, JR., P.A. 33195 PONCE DE LEON BLVD SUITE 400 CORAL GABLES, FL 33134 US			3195 PONCE DE L SUITE 400	LAW OFFICE OF CARLOS A. ROMERO, JR., P.A. 3195 PONCE DE LEON BLVD SUITE 400 CORAL GABLES, FL 33134 US	
	named entity e of Florida.	submits this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATURE: CARLOS A ROMERO JR, PRESIDENT				05/26/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financi	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( DUBON, JOSI P.O. BOX 192 SAN JUAN, PI	2336	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( DUBON, MAN P.O. BOX 192 SAN JUAN, PI	336	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D ( DUBON, LUIS P.O. BOX 192		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JOSE R DUBON D 05/26/2005