

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000109622

FILED
Mar 06, 2009
Secretary of State

Entity Name: MASTER IMPORT & EXPORT TRADING, INC.

Current Principal Place of Business:

16830 COLLINS AVE.
SUNNY ISLES, FL 33160

New Principal Place of Business:

18851 NE 29TH AVE
710
AVENTURA, FL 33180 US

Current Mailing Address:

16830 COLLINS AVE.
SUNNY ISLES, FL 33160

New Mailing Address:

18851 NE 29TH AVE
710
AVENTURA, FL 33180 US

FEI Number: 42-1606646

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVA, HAROLDO S
19111 COLLINS AVE 1805
NORTH MIAMI BEACH, FL 33160 US

Name and Address of New Registered Agent:

SILVA, HAROLDO S
19111 COLLINS AVE 1805
SUNNY ISLES BEACH, FL 33180 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: HAROLDO SILVA

03/06/2009

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: SILVA, HAROLDO S
Address: 19111 COLLINS AVE 1805
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SILVA, HAROLDO S
Address: 19111 COLLINS AVE 1805
City-St-Zip: SUNNY ISLES BEACH, FL 33180

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: HAROLDO SILVA

DP

03/06/2009

Electronic Signature of Signing Officer or Director

Date