2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 23, 2006
Secretary of State

DOCUMENT# P03000112639

Entity Name: BEMSA PROPIEDAD RAIZ, CORP.

Current Principal Place of Business:

4971 N UNIVERSITY DRIVE
14 A
LAUDERHILL, FL 33351

New Principal Place of Business:

600 NORTH PINE ISLAND ROAD
450
PLANTATION, FL 33324

Current Mailing Address:

4971 N UNIVERSITY DRIVE
14 A
LAUDERHILL, FL 33351

New Mailing Address:

600 NORTH PINE ISLAND ROAD
450
PLANTATION, FL 33324

FEI Number: 20-0294804 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONTESDEOCA, DIEGO
4971 N UNIVERSITY DRIVE
14 A
LAUDERHILL, FL 33351 US

Name and Address of New Registered Agent:

ACEVEDO, JAIME F
600 NORTH PINE ISLAND ROAD
450
PLANTATION, FL 33324 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: JAIME F. ACEVEDO 03/23/2006
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: P ( ) Delete
Name: ACEVEDO, JAIME F
Address: 10688 NW 16 COURT
City-St-Zip: PLANTATION, FL 33322

Title: VP ( ) Delete
Name: ARBELAEZ, CLARA C
Address: 2080 S OCEAN DRIVE, UNIT 1105
City-St-Zip: HALLANDALE, FL 33009

Title: S/T (X) Delete
Name: MONTESDEOCA, DIEGO
Address: 491 N UNIVERSITY DRIVE, SUITE 14 A
City-St-Zip: LAUDERHILL, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: ARBELAEZ, CLARA C
Address: 1551 NORTH FLAGLER DRIVE #601
City-St-Zip: WEST PALM BEACH, FL 33401

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JAIME F. ACEVEDO P 03/23/2006
Electronic Signature of Signing Officer or Director Date