## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000145892

Entity Name: RESERVATION MASTERS USA, INC.

FILED Nov 05, 2007 Secretary of State

| Littly Nai                | HE. KESEKVA                            | THON WASTERS USA, INC.               |                           |  |  |  |
|---------------------------|--|--------------------------------------|---------------------------|--|--|--|
| Current P                 | rincipal Place                         | of Business:                         | New Prince                | New Principal Place of Business:             |  |  |
| 3920 INVE                 | RRARY BLVD.                            |                                      |                           |  |  |  |
| STE. C-106                | 6                                      |                                      |                           |  |  |  |
| LAUDERH                   | ILL, FL 33319                          |                                      |                           |  |  |  |
| Current M                 | ailing Address                         | :                                    | New Mail                  | New Mailing Address:                         |  |  |
| 1222 N.E. 4               | 4TH AVENUE                             |                                      | 3920 INVE                 | 3920 INVERRARY BLVD                          |  |  |
| FORT LAUDERDALE, FL 33304 |  |                                      |                           | SUITE C-106<br>LAUDERHILL, FL 33319 US       |  |  |
|                           |  |                                      | LAUDERF                   | 11LL, FL 333                                 | 19 US                                  |  |
| FEI Number:               | 20-0453816                             | FEI Number Applied For ( )           | FEI Number Not App        | licable ( )                                  | Certificate of Status Desired ( )      |  |
| Name and                  | Address of Cu                          | ırrent Registered Agent:             | Name and                  | Name and Address of New Registered Agent:    |  |  |
| 1222 N.E. 4               | RE, MARC<br>4TH AVENUE<br>IDERDALE, FL | 33304 US                             |                           |  |  |  |
| The above in the State    |  | ubmits this statement for the p      | ourpose of changing       | its registered                               | d office or registered agent, or both, |  |
| SIGNATUR                  | RE: MARC LA                            | BOSSIÈRE                             |                           |  |  |  |
|                           | Electronic                             | Signature of Registered Age          | ent                       |  | Date                                   |  |
| In accordance             | ce with s. 607.193                     | (2)(b), F.S., the corporation did no | t receive the prior notic | e.   |  |  |
|                           | -                                      | Trust Fund Contribution ( ).         |                           |  |  |  |
| OFFICERS AND DIRECTORS:   |  |                                      | ADDITION                  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |  |
| Title:                    | P ()[                                  | Delete                               | Title:                    | Р  | (X) Change ( ) Addition                |  |
| Name:                     | MINEAULT-SIMA                          | RD, LOUISE                           | Name:                     | MINEAULT-SIMARD, LOUISE                      |  |  |
| Address:                  | 168 RICHELIEU                          |                                      | Address:                  | 80-1 PRINCIPALE STREET                       |  |  |
| City-St-Zip:              | MONTEBELLO, (                          | CANADA, JOV 1LO                      | City-St-Zip:              | ST-ANDRE-A                                   | AVELLIN, CANADA, QC JOV 1W0 CA         |  |
| Title:                    | I() V                                  | Delete                               | Title:                    | V  | (X) Change ( ) Addition                |  |
| Name:                     | SIMARD, PAUL                           |                                      | Name:                     | SIMARD, PA                                   | NUL .                                  |  |
| Address:                  | 168 RICHELIEU                          |                                      | Address:                  | 80-1 PRINCIPALE STREET                       |  |  |
| City-St-Zip:              | MONTELBELLO,                           | CANADA, JOV 1L0                      | City-St-Zip:              | ST-ANDRE-A                                   | AVELLIN, CANADA, QC JOV 1W0 CA         |  |
| Title:                    | M ()                                   | Delete                               | Title:                    | M  | (X) Change ( ) Addition                |  |
| Name:                     | PIUZE, BERNAR                          | D                                    | Name:                     | PIUZE, BERNARD                               |  |  |
| Address:                  |  | ISLAND DR., #907                     | Address:                  | 2215 CYPRESS ISLAND DR., #907                |  |  |
| City-St-Zip:              | POMPANO BEAC                           | CH, FL 33069                         | City-St-Zip:              | POMPANO E                                    | BEACH, FL 33069 US                     |  |
| Title:                    | D ()                                   | Delete                               | Title:                    |  | () Change () Addition                  |  |
| Name:                     | SIMARD, NATHA                          | LIE                                  | Name:                     |  |  |  |
| Address:                  | 90 ROCKWELL                            |                                      | Address:                  |  |  |  |

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.

City-St-Zip:

SIGNATURE: LOUISE MINEAULT SIMARD P 11/05/2007

TORONTO, ON M6N 1N8 CA

City-St-Zip: