2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Jan 11, 2005
Secretary of State

DOCUMENT# P03000152506

Entity Name: PALO ALTO USA CORP.

Current Principal Place of Business:

6902 NW 112 AVE
MIAMI, FL 33178

New Principal Place of Business:

Current Mailing Address:

6902 NW 112 AVE
MIAMI, FL 33178

New Mailing Address:

FEI Number: 20-0506166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHIARI, JOSE R
6902 NW 112 AVE
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

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: JOSE R CHIARI

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: PD ( ) Delete
Name: CHIARI, JOSE R
Address: 6902 NW 112 AVE
City-St-Zip: MIAMI, FL 33178

Title: VD ( ) Delete
Name: CHIARI, JUAN L
Address: 6902 NW 112 AVE
City-St-Zip: MIAMI, FL 33178

Title: SD ( ) Delete
Name: LEMARCHAND, JUAN P
Address: 12708 NW 11TH TERR
City-St-Zip: MIAMI, FL 33182

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: CHIARI, JUAN L
Address: 6902 NW 112 AVE
City-St-Zip: MIAMI, FL 33178

Title: VD (X) Change ( ) Addition
Name: LEMARCHAND, JUAN P
Address: 12708 NW 11TH TERR
City-St-Zip: MIAMI, FL 33182

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.

SIGNATURE: JOSE R CHIARI PD 01/11/2005

Electronic Signature of Signing Officer or Director Date