2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000076616

Entity Name: BELMONDO INTERNATIONAL, INC.

FILED Sep 28, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

20185 NE 16TH PLACE 20181 NE 16TH PLACE MIAMI, FL 33179 SUITE 1A

MIAMI, FL 33179 US

Current Mailing Address: New Mailing Address:

20185 NE 16TH PLACE 20181 NE 16TH PLACE SUITE 1A MIAMI, FL 33179 MIAMI, FL 33179 US

FEI Number: 20-1120270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAWARDI, DEBRA MAWARDI, DEBRA 20185 NE 16TH PLACE 20181 NE 16TH PLACE MIAMI, FL 33179 SUITE 1A MIAMI, FL 33179 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: DEBRA MAWARDI 09/28/2005

> 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: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete MAWARDI, DEBRA MAWARDI, DEBRA Name: Name: 20185 NE 16TH PLACE Address: 20181 NE 16TH PLACE Address: City-St-Zip: MIAMI, FL 33179 US City-St-Zip: MIAMI, FL 33179 US

Title: () Delete Title: PR () Change (X) Addition

Name: Name: DEBRA MAWARDI. Address: Address: 20181 NE 16 PLACE MIAMI, FL 33179 US City-St-Zip: City-St-Zip:

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: DEBRA MAWARDI PR 09/28/2005