2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000095636

Entity Name: M.I.A R.S 1 CORP.

FILED Apr 23, 2009 Secretary of State

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

2600 DOUGLAS RD. 2665 SOUTH BAYSHORE DRIVE

SUITE 1100 SUITE 906

CORAL GABLES, FL 33134 COCONUT GROVE, FL 33133

New Mailing Address: **Current Mailing Address:**

2600 DOUGLAS RD. 2665 SOUTH BAYSHORE DRIVE **SUITE 1100** SUITE 906

CORAL GABLES, FL 33134 COCONUT GROVE, FL 33133

FEI Number: 20-1274492 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GURIAN, JORGE GURIAN, JORGE 2600 DOUGLAS RD. 2665 SOUTH BAYSHORE DRIVE **SUITE 1100** STE 906

CORAL GABLES, FL 33134 US COCONUT GROVE, FL 33133 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: JORGE GURIAN 04/23/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MORILLO-FIORILLO, ALEJANDRO MORILLO-FIORILLO, ALEJANDRO Name: Name: 2600 DOUGLAS RD. SUITE 1100 2665 SOUTH BAYSHORE DRIVE STE 906 Address: Address:

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: COCONUT GROVE, FL 33133

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

Name: REYES, SAMANTHA Name: REYES, SAMANTHA

2600 DOUGLAS RD. SUITE 1100 Address: 2665 SOUTH BAYSHORE DRIVE STE 906 Address:

CORAL GABLES, FL 33134 COCONUT GROVE, FL 33133 City-St-Zip: City-St-Zip:

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: ALEJANDRO MORILLO-FIORILLO PD 04/23/2009