


2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000101593		
1. Entity Name SOUTH AMERICA TRADING GROUP, CORP.		

FILED
07 MAY 30 AM 10: 53
TALLAHASSEE, FLORIDA

Principal Place of Business 650 WEST AVE 2804 MIAMI BEACH, FL 33139	Mailing Address 650 WEST AVE 2804 MIAMI BEACH, FL 33139
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2. Principal Place of Business - No P.O. Box # 2666 NW 97 Ave	3. Mailing Address 2666 NW 97 Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Doral, FL	City & State Doral, FL
Zip 33172	Country U.S.A.
Zip 33172	Country U.S.A.



6. Name and Address of Current Registered Agent MONTEMAYOR, ELOY 650 WEST AVE MIAMI BEACH, FL 33139	7. Name and Address of New Registered Agent Name Jose L Garcia Street Address (P.O. Box Number is Not Acceptable) 10830 NW 78 Terr City Doral FL Zip Code 33178
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Jose L. Garcia 05-31-07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$900.00

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MONTEMAYOR, ELOY 650 WEST AVE MIAMI BEACH, FL 33139 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Freddy C. De Cordova 15637 SW 53 St. Miramar, FL 33027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Nela Lazo De Cordova 15637 SW 53 St. Miramar, FL 33027 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T CANNAVO S. A. Calle El Salado, Redondo Ferry Cumaná, Edo Sucre, Venezuela <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	400103882334 06/05/07--01009--005 **900.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>JPB/6</u> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Freddy C. De Cordova 05-31-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #