## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000136961

Entity Name: SUM COMIDAS DEL PAIS, CORP

FILED Sep 28, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5230 NW 109 AVE

UNIT 8

DORAL, FL 33178 US

Current Mailing Address: New Mailing Address:

5230 NW 109 AVE UNIT 8

DORAL, FL 33178 US

FEI Number: 20-2475395 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:

BRUNO GRULLON, ELEEN A
5230 NW 109 AVE
UNIT 8
DORAL, FL 33178 US

BRUNO, SANDRA
5230 NW 109 AVE
UNIT 8
DORAL, FL 33178 US

DORAL, FL 33178 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: SANDRA BRUNO

SANDRA BRUNO 09/28/2006

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

 Name:
 BRUNO GRULLON, ELEEN A
 Name:
 BRUNO, SANDRA

 Address:
 5230 NW 109 AVE UNIT 8
 Address:
 5230 NW 109 AVE UNIT 8

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:
 DORAL, FL 33178 US

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

 Name:
 BRUNO, SANDRA
 Name:

 Address:
 5230 NW 109 AVE UNIT 8
 Address:

 City-St-Zip:
 DORAL, FL 33178 US
 City-St-Zip:

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

 Name:
 ABREU, ARTURO L
 Name:

 Address:
 14215 S.W. 166 TERR.
 Address:

 City-St-Zip:
 MIAMI, FL 33176 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDRA BRUNO PD 09/28/2006