2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 22, 2005
Secretary of State

DOCUMENT# P04000149098

Entity Name: TOMADINI 1843 USA CORPORATION

Current Principal Place of Business:

7350 NW 7 STREET
SUITE 104
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 010270
MIAMI, FL 331010270

New Mailing Address:

P.O. BOX 010270
MIAMI, FL 33101

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHEHADE, SONIA
7350 NW 7 STREET
SUITE 104
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

SIGNORELLI, FABRIZIO
7350 NW 7 STREET
SUITE 104
MIAMI, FL 33126 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: FABRIZIO SIGNORELLI 11/22/2005
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: PD ( ) Delete
Name: RONCADIN, SIRO
Address: 7350 NW 7 STREET #104
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Delete
Name: ALMEIDA, JAIR
Address: 7350 NW 7 STREET #104
City-St-Zip: MIAMI, FL 33126

Title: SD (X) Delete
Name: CHEHADE, SONIA
Address: 7350 NW 7 STREET #104
City-St-Zip: MIAMI, FL 33126

Title: TD (X) Delete
Name: CAMPISI, LUIS
Address: 7350 NW 7 STREET #104
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SIGNORELLI, FABRIZIO
Address: 7350 NW 7 STREET SUITE 104
City-St-Zip: MIAMI, FL 33126 US

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: FABRIZIO SIGNORELLI PD 11/22/2005
Electronic Signature of Signing Officer or Director Date