

FROM : LAZARUS

FAX NO. : 3052201440

Sep. 08 2006 12:55PM P1

**2006 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # P04000166632

Entity Name
DANMARKAFINVESTMENT, INC.**FILED**

06 SEP 18 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 300 EUCLID AVE #201 MIAMI BEACH, FL 33139		Mailing Address 300 EUCLID AVE #201 MIAMI BEACH, FL 33139	
Principal Place of Business 303 ALCAZAR AVE		3. Mailing Address SAME AS	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI, FL 3		City & State	
Zip 33143		Country DADE	
4. FEI Number 20-1992326		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERNANDEZ, ALEXIS 300 EUCLID AVE #201 MIAMI BEACH, FL 33139		7. Name and Address of New Registered Agent PLINIO GONZALEZ 303 ALCAZAR AVE MIAMI, FL 33143	
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 <i>Plinio Gonzalez</i>		DATE 9/08/06	
FILE NOW!!! FEE IS \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. (PDVST) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERNANDEZ, ALEXIS 300 EUCLID AVE #201 MIAMI BEACH, FL 33139 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PLINIO GONZALEZ ☒ Change ☐ Addition 303 ALCAZAR AVE MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FERNANDEZ, ALEXIS 300 EUCLID AVE #201 MIAMI BEACH, FL 33139 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	000080180380 09/26/06--01039--012 ***300.00 ☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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 is 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 resolver 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 my address, with all other like empowered.			
SIGNATURE <i>Plinio Gonzalez</i>		DATE 9/08/06 786-277-1307	

B. Michel SEP 18 2006