2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000169162

1. Entity Name
APIA USA, CORP.

FILED
05 OCT 18 AM 8:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10082005 REIN-P CR2E098 (6/04)

Principal Place of Business	Mailing Address
7725 SW 86TH STREET #418 MIAMI, FL 33143	7725 SW 86TH STREET #418 MIAMI, FL 33143

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 20-2030635 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DREIKHA, ANTOUN
7725 SW 86TH STREET
#418
MIAMI, FL 33143

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After January 1, 2006, Fee will be $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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DREIKHA, ANTOUN 7725 SW 86TH STREET #418 MIAMI, FL 33143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 900060692579 10/18/05--01006--008 **150.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DRIKHA, IBRAHIM 7725 SW 86TH STREET #418 MIAMI, FL 33143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DRIKHA, PIERRE 7725 SW 86TH STREET #418 MIAMI, FL 33143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 10/24
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST BREUER, MARIA 7725 SW 86TH STREET #418 MIAMI, FL 33143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DRIKHA, FAEZ 7725 SW 86TH STREET #418 MIAMI, FL 33143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HAJJAR, ABBOUD 7725 SW 86TH STREET #418 MIAMI, FL 33143	☐ 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 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 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: _____ 10-11-2005 786-3026668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #