2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000018692

Entity Name: CARGRAPHIC USA, INC.

FILED Mar 21, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
%SANCHEZ-MEDINA & ASSOCIATES, P.A. THE COLONNADE/302, 2333 PONCE DE LEON BLVD CORAL GABLES, FL 33134					
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
%SANCHEZ-MEDINA & ASSOCIATES, P.A. THE COLONNADE/302, 2333 PONCE DE LEON BLVD CORAL GABLES, FL 33134					
FEI Number:	20-2762350	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address o	f Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SANCHES MEDINA, ROLAND JR. %SANCHEZ-MEDINA & ASSOCIATES, P.A. THE COLONNADE/302, 2333 PONCE DE LEON BLVD CORAL GABLES, FL 33134 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: ROLAND SANCHEZ-MEDINA JR.					
	Elect	ronic Signature of Registered Age	nt	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		• ,	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	PD ZELCER, HI	() Delete ENRY	Title: (Name:) Change () Addition	

%2333 PONCE DE LEON BLVD., SUITE 302 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: (X) Delete Title: () Change () Addition SCHNARR, THOMAS Name: Name: Address: %2333 PONCE DE LEON BLVD., STE. 302 Address: CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition Name: SCHNARR, MICHAEL Name: %2333 PONCE DE LEON BLVD., SUITE 302 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: SD (X) Delete Title: () Change () Addition RENTO, DAVID Name: Name: %2333 PONE DE LEON BLVD., SUITE 302 Address: Address:

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.

City-St-Zip:

SIGNATURE: ROLAND SANCHEZ-MEDINA JR. RA 03/21/2007

CORAL GABLES, FL 33134

City-St-Zip: