2006 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 21, 2006
Secretary of State

DOCUMENT# P05000100505

Entity Name: AGIL OF MIAMI INC.

Current Principal Place of Business:

300 CORAL WAY SUITE 709
CORAL GABLES, FL 33145

New Principal Place of Business:

7232 NW 70 STREET
MIAMI, FL 33166

Current Mailing Address:

300 CORAL WAY SUITE 709
CORAL GABLES, FL 33145

New Mailing Address:

7232 NW 70 STREET
MIAMI, FL 33166

FEI Number: 20-3167412 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SOSA, GISELA
300 CORAL WAY SUITE 709
CORAL GABLES, FL 33145 US

Name and Address of New Registered Agent:

SOSA, GISELA
7232 NW 70 STREET
MIAMI, FL 33166 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: GISELA SOSA 09/21/2006
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:

Title: P ( ) Delete
Name: SOSA, GISELA
Address: 300 CORAL WAY SUITE 709
City-St-Zip: CORAL GABLES, FL 33145

Title: VS ( ) Delete
Name: SOSA, SANDRA
Address: 300 CORAL WAY SUITE 709
City-St-Zip: CORAL GABLES, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SOSA, GISELA
Address: 7232 NW 70TH STREET
City-St-Zip: MIAMI, FL 33166

Title: VS (X) Change ( ) Addition
Name: SOSA, SANDRA
Address: 7232 NW 70TH STREET
City-St-Zip: MIAMI, FL 33166

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: GISELA SOSA P 09/21/2006
Electronic Signature of Signing Officer or Director Date