2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000104144

Entity Name: THE RESIDENCES 105-2/106-2 CORP.

FILED Jan 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2600 DOUGLAS ROAD 2665 S BAYSHORE DRIVE, #906

SUITE 1100 SUITE 906

CORAL GABLES, FL 33134 COCONUT GROVE, FL 33133

Current Mailing Address: New Mailing Address:

2600 DOUGLAS ROAD 2665 S BAYSHORE DRIVE SUITE 1100 SUITE 906

CORAL GABLES, FL 33134 COCONUT GROVE, FL 33133

FEI Number: 20-3207578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GURIAN, JORGE GURIAN, JORGE 2600 DOUGLAS ROAD 2665 S BAYSHORE DRIVE

SUITE 1100 SUITE 906
CORAL GABLES, FL 33134 US COCONUT GROVE, FL 33133 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: JORGE GURIAN 01/07/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DI GIACINTO, MAURIZIO DI GIACINTO, MAURIZIO Name: Name: 2600 DOUGLAS ROAD, #1100 2665 S BAYSHORE DRIVE, #906 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: COCONUT GROVE, FL 33133

() Delete Title: Title: (X) Change () Addition DI FILIPPANTONIO, SERGIO DI FILIPPANTONIO, SERGIO Name: Name: 2600 DOUGLAS ROAD, #1100 2665 S BAYSHORE DRIVE, #906 Address: Address: CORAL GABLES, FL 33134 COCONUT GROVE, FL 33133 City-St-Zip: City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name: GALBIATI, MARCO Name: GALBIATI, MARCO

Address: 2600 DOUGLAS ROAD, #1100 Address: 2665 S BAYSHORE DRIVE, #906
City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: COCONUT GROVE, FL 33133

I hereby certify that the information supplied with this filing does not qualify 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: MAURIZIO DI GIACINTO PD 01/07/2009