2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000147130

Entity Name: ORLEI, CORP.

FILED Jan 17, 2007 Secretary of State

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

450 ALTON RD UNIT 1205 MIAMI, FL 33139

Current Mailing Address: New Mailing Address:

450 ALTON RD 443 WEST 56TH STREET UNIT 1205 UNIT 1D NEW YORK, NY 10019

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

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

XIQUES, ALFREDO D 2950 SW 27TH AVE STE 300 MIAMI, 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: ALFREDO XIQUES

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

 Name:
 MIMOUN, SYLVAIN
 Name:
 MIMOUN, SYLVAIN

 Address:
 450 ALTON RD - UNIT 1205
 Address:
 443 WEST 56TH STREET. APT 1D

City-St-Zip: MIAMI, FL 33139 City-St-Zip: NEW YORK, NY 10019

Title: D () Delete Title: D (X) Change () Addition
Name: SOLOMON AMAZIS
Name: SOLOMON AMAZIS

 Name:
 SOLOMON, AMAZIS
 Name:
 SOLOMON, AMAZIS

 Address:
 450 ALTON RD - UNIT 1205
 Address:
 300 BEALE STREET #308

 City-St-Zip:
 MIAMI, FL 33139
 City-St-Zip:
 SAN FRANCISCO, CA 94105

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: AMAZIS SOLOMON D 01/17/2007