2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000153673

Entity Name: TECNOMATIC CORP

City-St-Zip:

MIAMI, FL 33131 US

FILED Oct 16, 2006 Secretary of State

y	1201101	W/ THE COIN					
Current Principal Place of Business:				New Principal Place of Business:			
4440 NW 73RD AV CCS 7102 MIAMI, FL 33166				11010 NW 30TH CCS 7102 - SUITE 104 MIAMI, FL 33172 US			
Current Mailing Address:				New Mailing Address:			
CCS 7102 4440 NW 73RD AV MIAMI, FL 33166				CCS 7102 P.O.BOX 025323 MIAMI, FL 33102 US			
FEI Number	: 20-3811493	FEI Number Applied For ()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
RD GLOBAL CONSULTING, INC 185 SE 14TH TERRACE SUITE 801 MIAMI, FL 33131 US				RD GLOBAL CONSULTING, INC 200 S. BISCAYNE BLVD SUITE 830 MIAMI, FL 33131 US			
	named entity e of Florida.	submits this statement for the p	ourpose o	f changing i	ts registere	d office or registered agent, or both,	
SIGNATURE: REYNALDO DIAZ						10/16/2006	
	Electro	nic Signature of Registered Age	ent			Date	
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution().	ot receive t	he prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DRORI, URI) Delete D.BOX 025323 102 US		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DRORI, IANIR	D.BOX 025323		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DRORI, IANIR	D.BOX 025323		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	DIAZ, REYNAI) Delete LDO TERRACE SUITE 801		Title: Name: Address:	TREA DRORI, UR CCS 7102 F	(X) Change () Addition I P.O.BOX 025323	

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: IARNIR DRORI VΡ 10/16/2006

MIAMI, FL 33102