2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000017645

Entity Name: KIKA ENTERPRISES, INC.

FILED Jan 31, 2008 Secretary of State

US

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

17125 NORTH BAY ROAD 1501 NE 16TH ST

FT LAUDERDALE, FL 33304 APT. 3101

SUNNY ISLES BEACH, FL 33160

New Mailing Address: Current Mailing Address:

17125 NORTH BAY ROAD 1501 NE 16TH ST

APT, 3101 FT LAUDERDALE, FL 33304 SUNNY ISLES BEACH, FL 33160

FEI Number: 20-4297719 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DAVILA, MARIA C DAVILA, MARIA C 17125 NORTH BAY ROAD 1501 NÉ 16TH ST APT. 3101 FT LAUDERDALE, FL 33304

SUNNY ISLES BEACH, FL 33160 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: MARIA DAVILA 01/31/2008

> 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 (). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

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

Title: DAVILA, MARIA C DAVILA, MARIA C Name: Name:

17125 NORTH BAY ROAD, APT. 3101 Address: 1501 NE 16TH ST Address: City-St-Zip: SUNNY ISLES BEACH, FL 33160 City-St-Zip: FT LAUDERDALE, FL 33304

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

SALGUERO, PABLO R Name: Name: Address: Address: 1501 NE 16TH ST FT LAUDERDALE, FL 33304 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: MARIA DAVILA 01/31/2008