

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000076483

Entity Name: ANAUE CAPOEIRA INC

FILED
Feb 27, 2008
Secretary of State

Current Principal Place of Business:

3301 N COUNTRY CLUB DR.
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

3301 N COUNTRY CLUB DR.
AVENTURA, FL 33180

New Mailing Address:

810 NE 199TH ST.
C201
MIAMI, FL 33179

FEI Number: 20-4981467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARIA, BRIAN C
3301 N COUNTRY CLUB DR.
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

FARIA, BRIAN C
810 NE 199TH ST.
C201
MIAMI, FL 33179 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: BRIAN C. FARIA

02/27/2008

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 ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARIA, BRIAN C
Address: 3301 N COUNTRY CLUB DR.
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FARIA, BRIAN C
Address: 810 NE 199TH ST. #C201
City-St-Zip: MIAMI, FL 33179

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: BRIAN C. FARIA

P

02/27/2008

Electronic Signature of Signing Officer or Director

Date