2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000093528

VALENCIA, CARLOS A

MIAMI, FL 33173

8600 SW 109 AVENUE, BLDG 4 APT 223

Name:

Address: City-St-Zip:

FILED Oct 04, 2007 Secretary of State

Entity Name: DISTRIBUCIONES KAMY, INC. **Current Principal Place of Business: New Principal Place of Business:** 8600 SW 109 AVENUE BLDG 4 APT 223 MIAMI, FL 33173 **New Mailing Address: Current Mailing Address:** 8600 SW 109 AVENUE BLDG 4 APT 223 MIAMI, FL 33173 FEI Number: 13-4338191 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: VALENCIA, NORMA M 8600 SW 109 AVENUE BLDG 4 APT 223 MIAMI, FL 33173 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: NORMA M VALENCIA 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 () Change () Addition VALENCIA, NORMA M Name: Name: 8600 SW 109 AVENUE, BLDG 4 APT 223 Address: Address: City-St-Zip: MIAMI, FL 33173 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: CALERO, MARIA C Name: 8600 SW 109 AVENUE, BLDG 4 APT 223 Address: Address: MIAMI, FL 33173 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: NORMA M VALENCIA 10/04/2007