## 2008 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000130986

Entity Name: U4RIA INC.

**FILED** Aug 13, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principa	al Place of Business:	New Principal Place of Business:

4121 NW 9 AVE 7980 WILES ROAD

POMPANO BEACH, FL 33064 CORAL SPRINGS, FL 33065

**Current Mailing Address:** New Mailing Address:

4121 NW 9 AVE 7980 WILES ROAD

POMPANO BEACH, FL 33064 CORAL SPRINGS, FL 33065

FEI Number: 20-5708491 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:

CASTRO, LUIS H CASTRO, LUIS H 4121 NW 9 AVE 7980 WILES ROAD

POMPANO BEACH, FL 33064 US CORAL SPRINGS, FL 33065 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: LUIS H CASTRO 08/13/2008

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

CASTRO, LUIS H CASTRO, LUIS H Name: Name:

4121 NW 9 AVE #5 7980 WILES ROAD SUITE B Address: Address: City-St-Zip: POMPANO BEACH, FL 33064 City-St-Zip: CORAL SPRINGS, FL 33065

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

Name: CASTRO, ADRIANA Name: CASTRO, ADRIANA

4121 NW 9 AVE #5 Address: 7980 WILES ROAD SUITE B Address: POMPANO BEACH, FL 33064 CORAL SPRINGS, FL 33065 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.

SIGNATURE: LUIS H CASTRO D 08/13/2008