2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000131789

Entity Name: COSMOPOLITAN STRATEGY CORPORATION

FILED Oct 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11402 NW 41 ST STE 211 #512 MIAMI, FL 33178 **Current Mailing Address: New Mailing Address:** 11402 NW 41 ST STE 211 MIAMI, FL 33178 FEI Number: 20-5759669 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: CARDONAOF, FERNANDO CARDONA, FERNANDO 3015 HAMBLIN WAY 3015 HAMBLIN WAY WELLINGTON, FL 33414 WELLINGTON, FL 33414 US 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: FERNANDO CARDONA 10/09/2008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CARDONAOF, FERNANDO CARDONA, FERNANDO Name: Name: 3015 HAMBLIN WAY 3015 HAMBLIN WAY Address: Address: City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414 Title: () Delete Title: () Change (X) Addition Name: Name: PEREZ. DORIS P.O BOX 33222 Address: Address: PALM BEACH GARDENS, FL 33420 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change (X) Addition Name: GONZALEZ, CARMEN M Name: P.O BOX 441105 Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33144

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: FERNANDO CARDONA PD 10/09/2008