2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000018500

Entity Name: BENELI, INC.

FILED Nov 21, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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19501 W. COUNTRY CLUB DRIVE 6157 RODMAN ST

410

HOLLYWOOD, FL 33023 US AVENTURA, FL 33180

New Mailing Address: Current Mailing Address:

19501 W. COUNTRY CLUB DRIVE 6157 RODMAN ST

HOLLYWOOD, FL 33023 US

AVENTURA, FL 33180 US

FEI Number: 20-8513283 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:

GANIS, YANAI EDDE, HAIM 19501 W. COUNTRY CLUB DRIVE 6157 RODMAN ST

HOLLYWOOD, FL 33023 US 410 AVENTURA, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

SIGNATURE: HAIM EDDE 11/21/2008

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:

in the State of Florida.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

EDDE, ELIAHOU EDDE, HAIM Name: Name: 19501 W. COUNTRY CLUB DRIVE # 410 Address: 6157 RODMAN ST Address:

City-St-Zip: AVENTURA, FL 33180 US City-St-Zip: HOLLYWOOD, FL 33023 US

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

Name: EDDE, SIMON Name: 19501 W. COUNTRY CLUB DRIVE #410 Address: Address: AVENTURA, FL 33180 US City-St-Zip: City-St-Zip:

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

GANIS, YANAI Name: Name: 19501 W. COUNTRY CLUB DRIVE #410 Address Address: City-St-Zip: AVENTURA, FL 33180 US City-St-Zip:

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

EDDE, HAIM Name: Name: 19501 W. COUNTRY CLUB DRIVE #410 Address: Address: City-St-Zip: AVENTURA, FL 33180 US 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: HAIM EDDE 11/21/2008