2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000020880

Entity Name: EUROCOSMO CENTER, CORP.

FILED Oct 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13190 SW 134 STREET #204 12970 SW 133 CT MIAMI, FL 33186 US SUITE B

MIAMI, FL 33186 US

Current Mailing Address: New Mailing Address:

13190 SW 134 STREET #204 12970 SW 133 CT

MIAMI, FL 33186 SUITE B

MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

FEI Number: 20-8466877 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:

CAPUTO, JACQUELINE CAPUTO, JACQUELINE 13190 SW 134 STREET #204 12970 SW 133 CT MIAMI, FL 33186 SUITE B

MIAMI, FL 33186 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: CAPUTO JACQUELINE 10/15/2009

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

CAPUTO, JACQUELINE CAPUTO, JACQUELINE Name: Name: 13190 SW 134 STREET #204 Address: 12970 SW 133 CT SUITE B Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186

Title: Title: VPD (X) Change () Addition () Delete ESTEVEZ, LESLIE Name: ESTEVEZ. LESLIE Name:

13190 SW 134 STREET #204 Address: 12970 SW 133 CT SUITE B Address:

MIAMI, FL 33186 MIAMI, FL 33186 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: CAPUTO JACQUELINE PD 10/15/2009