

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000048380

Entity Name: OPTIMUM AV SYSTEMS INC.,

FILED
Apr 28, 2009
Secretary of State

Current Principal Place of Business:

1835 NE MIAMI GARDENS DRIVE SUITE 443
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

7781 EMBASSY BLVD.
MIRAMAR, FL 33023

Current Mailing Address:

1835 NE MIAMI GARDENS DRIVE SUITE 443
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

7781 EMBASSY BLVD.
MIRAMAR, FL 33023

FEI Number: 01-0895081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POLYCARPE, RICARDO
1835 NE MIAMI GARDENS DRIVE SUITE 443
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

POLYCARPE, RICARDO
7781 EMBASSY BLVD.
MIRAMAR, FL 33023 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: RICARDO POLYCARPE

04/28/2009

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: PCEO () Delete
Name: POLYCARPE, RICARDO
Address: 1835 NE MIAMI GARDENS DRIVE SUITE 443
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: VP () Delete
Name: POLYCARPE, GUERLINE
Address: 1835 NE MIAMI GARDENS DRIVE SUITE 443
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change () Addition
Name: POLYCARPE, RICARDO
Address: 7781 EMBASSY BLVD.
City-St-Zip: MIRAMAR, FL 33023

Title: VP (X) Change () Addition
Name: POLYCARPE, GUERLINE
Address: 7781 EMBASSY BLVD.
City-St-Zip: MIRAMAR, FL 33023

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: RICARDO POLYCARPE

PCEO

04/28/2009

Electronic Signature of Signing Officer or Director

Date