## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P07000066825

Entity Name: TKD INT'L, CORP.

FILED Dec 11, 2009 Secretary of State

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

4800 NW 79 AVE, SUITE #201 9737 NW 41 ST DORAL, FL 33166 STE 640

DORAL, FL 33178

Current Mailing Address: New Mailing Address:

4800 NW 79 AVE, SUITE #201 9737 NW 41 ST DORAL, FL 33166 STE 640

DORAL, FL 33166 STE 640 DORAL, FL 33178

FEI Number: 26-0336715 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:

COLUMBO, JOSE L COLUMBO, JOSE L 4800 NW 79 AVE, SUITE #201 9737 NW 41 ST DORAL, FL 33166 US 640

DORAL, FL 33178 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: JOSE L. COLUMBO 12/11/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 COLUMBO, JOSE L
 Name:
 COLUMBO, JOSE L

 Address:
 4800 NW 79 AVE, SUITE #201
 Address:
 9737 NW 41 ST STE 640

 City-St-Zip:
 DORAL, FL 33166
 City-St-Zip:
 DORAL, FL 33178

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

 Name:
 Name:
 COLUMBO, SILVIA A

 Address:
 Address:
 9737 NW 41 ST STE 640

 City-St-Zip:
 City-St-Zip:
 DORAL, FL 33178

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: JOSE L. COLUMBO PD 12/11/2009