2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# P07000082893

Entity Name: PUMAMAKI INC.

Current Principal Place of Business:

1492 S. MIAMI AVE.
MIAMI, FL 33130

New Principal Place of Business:

Current Mailing Address:

1492 S. MIAMI AVE.
MIAMI, FL 33130

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAIZARBITORIA, INAKI ESQ.
21 S.W. 15TH ROAD (BROADWAY)
SUITE 200
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

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: INAKI SAIZARBITORIA

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: P ( ) Delete
Name: GOMEZ DE LA TORRE, JAVIER
Address: 1492 S. MIAMI AVE.
City-St-Zip: MIAMI, FL 33130

Title: S ( ) Delete
Name: PALACIOS LUZURIAGA, MARIA DEL C
Address: 1492 S. MIAMI AVE.
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete
Name: PALLARES PALACIOS, IGNACIO
Address: 1492 S. MIAMI AVE.
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete
Name: PALLARES PALACIOS, ESTEBAN
Address: 1492 S. MIAMI AVE.
City-St-Zip: MIAMI, FL 33130

Title: D ( ) Delete
Name: PALLARES PALACIOS, JOSE J
Address: 1492 S. MIAMI AVE.
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: JAVIER GOMEZ DE LA TORRE P 03/24/2009

Electronic Signature of Signing Officer or Director — Date