

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000090990

FILED
Oct 23, 2009
Secretary of State

Entity Name: ATM IMPORT & EXPORT OF S.F., INC.

Current Principal Place of Business:

1825 MAIN STREET C/O CHARM CONSULTING
WESTON, FL 33326

New Principal Place of Business:

1120 S POWERLINE RD C/O CHARM CONSULTING
POMPAÑO BEACH, FL 33069

Current Mailing Address:

1825 MAIN STREET C/O CHARM CONSULTING
WESTON, FL 33326

New Mailing Address:

FEI Number: 26-0735283

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARM CONSULTING
1825 MAIN STREET
WESTON, FL 33326 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: ISABEL MARTINEZ

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: PD () Delete
Name: PENARANDA, LUCAS F
Address: 9338 SW SRD STREET #515
City-St-Zip: BOCA RATON, FL 33428

Title: VPD () Delete
Name: RODRIGUEZ, EDGAR
Address: 9338 SW SRD STREET #515
City-St-Zip: BOCA RATON, FL 33428

Title: TD () Delete
Name: GALLIANI, DIANA CECILIA
Address: 9338 SW SRD STREET #515
City-St-Zip: BOCA RATON, FL 33428

Title: SD () Delete
Name: GALLIANI, LUIS FERNANDO
Address: 9338 SW SRD STREET #515
City-St-Zip: BOCA RATON, FL 33428

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:

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: RODRIGUEZ, EDGAR

VPD

10/23/2009

Electronic Signature of Signing Officer or Director

Date