2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 05, 2008
Secretary of State

DOCUMENT# P07000105161

Entity Name: CASIANO COMMUNICATIONS FLORIDA, INC.

Current Principal Place of Business:

1700 AVE FERNANDEZ JUNCOS
SAN JUAN, PR 009092938

New Principal Place of Business:

Current Mailing Address:

1700 AVE FERNANDEZ JUNCOS
SAN JUAN, PR 009092938

New Mailing Address:

FEI Number: 66-0701677 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: CORPORATE CREATIONS NETWORK INC.
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: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR ( ) Change (X) Addition
Name: CASIANO, MANUEL
Address: PO BOX 12130
City-St-Zip: SAN JUAN, PR 00914

Title: MRS ( ) Change (X) Addition
Name: CASIANO, KIMBERLY
Address: PO BOX 12130
City-St-Zip: SAN JUAN, PR 00914

Title: MR ( ) Change (X) Addition
Name: RAMON, JAIME
Address: PO BOX 12130
City-St-Zip: SAN JUAN, PR 00914

Title: MR ( ) Change (X) Addition
Name: DIAZ, ARTURO
Address: PO BOX 12130
City-St-Zip: SAN JUAN, PR 00914

Title: MR ( ) Change (X) Addition
Name: MORALES, MANUEL
Address: PO BOX 12130
City-St-Zip: SAN JUAN, PR 00914

Title: MR ( ) Change (X) Addition
Name: NOBLE, PETER
Address: PO BOX 12130
City-St-Zip: SAN JUAN, PR 00914

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: KAREN NOLLA MRS 12/05/2008
Electronic Signature of Signing Officer or Director Date