2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 10, 2009
Secretary of State

DOCUMENT# P08000058592

Entity Name: SV DIVERSY WORK, INC.

Current Principal Place of Business:

10839 SW 88 ST APT 255
MIAMI, FL 33176

New Principal Place of Business:

8520 SW 107TH AVE
BLDG #1 APT D5
MIAMI, FL 33173

Current Mailing Address:

10839 SW 88 ST APT 255
MIAMI, FL 33176

New Mailing Address:

8520 SW 107TH AVE
BLDG #1 APT D5
MIAMI, FL 33173

FEI Number: 26-2817560 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VILLALBA, SANTIAGO
10839 SW 88 ST APT 255
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

VILLALBA, SANTIAGO
8520 SW 107TH AVE
BLDG #1 APT D 5
MIAMI, FL 33173 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: SANTIAGO VILLALBA 11/10/2009
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: DP ( ) Delete
Name: VILLALBA, SANTIAGO
Address: 10839 SW 88 ST APT 255
City-St-Zip: MIAMI, FL 33176

Title: DV (X) Delete
Name: PERAZA, MICHAEL
Address: 10839 SW 88 ST APT 255
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: VILLALBA, SANTIAGO
Address: 8520 SW 107TH AVE BLDG #1 APT D 5
City-St-Zip: MIAMI, FL 33173

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: SANTIAGO VILLALBA PRES 11/10/2009
Electronic Signature of Signing Officer or Director Date