

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000100573

**FILED**  
**Dec 20, 2010**  
**Secretary of State**

**Entity Name:** THRYKON INTERNATIONAL, INC.

## **Current Principal Place of Business:**

5201 BLUE LAGOON DRIVE  
SUITE 859  
MIAMI, FL 33126

## **New Principal Place of Business:**

8211 NW 64 STREET  
UNIT 6  
DORAL, FL 33126 US

## **Current Mailing Address:**

5201 BLUE LAGOON DRIVE  
SUITE 859  
MIAMI, FL 33126

## **New Mailing Address:**

8211 NW 64 STREET  
UNIT 6  
DORAL, FL 33166 US

**FEI Number:** 26-3685689

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

## **Name and Address of Current Registered Agent:**

AMORIM, TIAGO  
5201 BLUE LAGOON DRIVE 8TH FLOOR  
SUITE 859  
MIAMI, FL 33126 US

## **Name and Address of New Registered Agent:**

AMORIM, TIAGO  
8211 NW 64 STREET  
UNIT 6  
DORAL, FL 33166 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: TIAGO AMORIM

12/20/2010

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD  
Name: AMORIM, TIAGO  
Address: 8211 NW 64 STREET UNIT 6  
City-St-Zip: DORAL, FL 33166 US

Title: VD  
Name: AMORIM, LUIS C  
Address: 8211 NW 64 STREET UNIT 6  
City-St-Zip: DORAL, FL 33166 US

I hereby 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 all other like empowered.

SIGNATURE: TIAGO AMORIM

PD

12/20/2010

Electronic Signature of Signing Officer or Director

Date