

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P09000014476

**FILED**  
**Nov 08, 2010**  
**Secretary of State**

**Entity Name:** AXON COMUNICACION INTERNATIONAL CORP.

**Current Principal Place of Business:**

801 BRICKELL AVE  
SUITE 900  
MIAMI, FL 33131

**New Principal Place of Business:**

801 BRICKELL AVENUE  
9TH FLOOR, PMB 909  
MIAMI, FL 33131

**Current Mailing Address:**

801 BRICKELL AVE  
SUITE 900  
MIAMI, FL 33131

**New Mailing Address:**

2804 DEL PRADO BLVD.  
209-1  
CAPE CORAL, FL 33904

**FEI Number:** 26-4278726

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

POMAR, JULIO CESAR  
17926 SW 146 CT  
MIAMI, FL 33177 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: JULIO CESAR POMAR

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PARADA LOAIZA, ANDREA C  
Address: 2804 DEL PRADO BLVD., SUITE 209-1  
City-St-Zip: CAPE CORAL, FL 33904

Title: VPD  
Name: TRELLES CARRION, CARLOS AUGUSTO  
Address: 2804 DEL PRADO BLVD., SUITE 209-1  
City-St-Zip: CAPE CORAL, FL 33904

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: CARLOS TRELLES

MR

11/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date