

# 2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P12000053930

Entity Name: C.A. MANAGEMENT INC.

FILED  
Feb 14, 2014  
Secretary of State

**Current Principal Place of Business:**

6635 NW 174 LANE  
MIAMI, FL 33015

**New Principal Place of Business:**

6635 NW 174 LANE  
MIAMI, FL 33015 US

**Current Mailing Address:**

6635 NW 174 LANE  
MIAMI, FL 33015 US

**New Mailing Address:**

FEI Number: 90-0859442

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ANGELINI, ROBERTO C  
6635 NW 174 LANE  
MIAMI, FL 33015 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: ROBERTO C ANGELINI

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ANGELINI, ROBERTO C  
Address: 6635 NW 174 LANE  
City-St-Zip: MIAMI, FL 33015 US

Title: VP  
Name: DUFAU, MARCELA A  
Address: 6635 NW 174 LANE  
City-St-Zip: MIAMI, FL 33015 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: MARCELA A DUFAU

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

VP

02/14/2014

\_\_\_\_\_  
Date