

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000072888

Entity Name: PIANTE INC

**FILED**  
**Oct 22, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

8180 NW 36 STREET  
327  
DORAL, FL 33166

**New Principal Place of Business:**

**Current Mailing Address:**

8180 NW 36 STREET  
327  
DORAL, FL 33166

**New Mailing Address:**

FEI Number: 46-0963866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIL, RODOLFO  
8180 NW 36 STREET  
327  
DORAL, FL 33166 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: RODOLFO GIL

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DIR  
Name: GIL, RODOLFO  
Address: 8180 NW 36 STREET STE 327  
City-St-Zip: DORAL, FL 33166

Title: DIR  
Name: GIL, FEDERICO  
Address: 8180 NW 36 STREET STE 327  
City-St-Zip: DORAL, FL 33166

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: RODOLFO GIL

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

DIR

10/22/2013

\_\_\_\_\_  
Date