2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P30022

Entity Name: MAXITILE, INC.

FILED Jun 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 849 E SANDHILL AVE CARSON, CA 90746 US **Current Mailing Address: New Mailing Address:** 849 E SANDHILL AVE CARSON, CA 90746 US FEI Number: 95-3998636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: CT CORP Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PST () Delete Title: **PRFS** (X) Change () Addition DJURKLOU, NILS, Name: Name: BENDER, MARTIN 849 E SANDHILL AVE 849 E SANDHILL AVE Address: Address: City-St-Zip: CARSON, CA City-St-Zip: CARSON, CA 90746 CD Title: Title: () Delete (X) Change () Addition Name: DE METZ, ALAIN Name: DE METZ, ALAIN ALEJANDRO DUMAS #103 2 PISO ALEJANDRO DUMAS #103 2 PISO Address: Address: COL CHAPULTEPECK POLANCO, MX 11560 COL CHAPULTEPECK POLANCO, MX 11560 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition ASTIER, ALBERT, Name: Name: ALEJANDRO DUMAS #103 2 PISO Address: Address: COL CHAPULTEPEC POLANCO, MX City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition DJURKLOU, NILS FREITAS, CARLOS Name: Name: Address: 849 E SANDHILL AVE Address: 849 E SANDHILL AVE City-St-Zip: CARSON, CA 90746 City-St-Zip: CARSON, CA 90746 Title: (X) Delete Title: () Change () Addition Name: BENDER, MARTIN Name: 849 E. SANDHILL AVE Address: Address: City-St-Zip: CARSON, CA 90746 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MARTIN BENDER PRES 06/07/2006