

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P94000058006

**FILED**  
**Oct 12, 2010**  
**Secretary of State**

**Entity Name:** E.P. KAUFMANN & COMPANY (USA) INC.

**Current Principal Place of Business:**

210 WORTH AVE.  
PALM BEACH, FL 33480

**New Principal Place of Business:**

210 WORTH AVE.  
PALM BEACH, FL 33480 US

**Current Mailing Address:**

210 WORTH AVE.  
PALM BEACH, FL 33480

**New Mailing Address:**

210 WORTH AVE.  
PALM BEACH, FL 33480 US

**FEI Number:** 65-0515440

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAUFMANN, MONECA  
210 WORTH AVENUE  
PALM BEACH, FL 33480 US

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

KAUFMANN, MONICA  
210 WORTH AVENUE  
PALM BEACH, FL 33480 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: MONICA KAUFMANN

10/12/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KAUFMANN, EMIL PIUS  
Address: 2195 CRESCENT ST.  
City-St-Zip: MONTREAL, QC H3G 2C1 CA

Title: VP  
Name: KAUFMANN, MONICA  
Address: 210 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480 US

Title: S  
Name: KAUFMANN, MONICA  
Address: 210 WORTH AVENUE  
City-St-Zip: PALM BEACH, FL 33480 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: MONICA KAUFMANN

VP

10/12/2010

Electronic Signature of Signing Officer or Director

Date