2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000048992

Entity Name: RAMIREZ, INC.

FILED Jul 31, 2007 Secretary of State

| Current P | rincipal Place | e of Business: | New Principal Place of Business: | |
|--------------------------|--|--------------------------------------|------------------------------------|--------------------------------------|
| 1237 PAR ORANGE | K AVE PARK, FL 320 | 073 | | |
| Current Mailing Address: | | | New Mailing Address: | |
| 1237 PAR | RESTAURAN K AVE PARK, FL 320 | | | |
| FEI Number | : 59-3322824 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired (X) |
| Name and | d Address of (| Current Registered Agent: | Name and Address of | New Registered Agent: |
| 679 MART | , PEDRO A FINIQUE CT. PARK, FL 320 | 073 US | | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its registered | office or registered agent, or both, |
| SIGNATU | RE: PEDRO | A RAMIREZ | | |
| | Electron | nic Signature of Registered Ag | ent | Date |
| | | 3(2)(b), F.S., the corporation did n | ot receive the prior notice. | |
| | mpaign Financin S AND DIREC | g Trust Fund Contribution (). | ADDITIONS/CHANCE | S TO OFFICERS AND DIRECTOR |
| OFFICER | | iors. | | |
| Title: | * |) Delete | | () Change () Addition |
| Name: Address: | RAMIREZ, PEI 679 MANTINIQ | | Name: Address: | |
| City-St-Zip: | ORANGE PARI | | City-St-Zip: | |
| | _ | | | |
| Title: | • |) Delete | | () Change () Addition |
| Name: | RAMIREZ, MEI | | Name: | |
| Address: | 679 MANTINIQ | | Address: | |
| City-St-Zip: | ORANGE PARI | K, FL 32073 | City-St-Zip: | |
| Title: | D (|) Delete | Title: | () Change () Addition |
| Name: | RAMIREZ, DAL | MACIO | Name: | |
| Address: | 679 MARTINIQ | | Address: | |
| City-St-Zip: | ORANGE PARI | K, FL | City-St-Zip: | |
| Title: | D (|) Delete | Title: | () Change () Addition |
| Name: | RAMIREZ, ANG | * | Name: | (, |
| Address: | 679 MARTINIQ | | Address: | |
| Citv-St-Zip: | ORANGE PARI | | City-St-Zip: | |

I hereby certify that the information supplied with this filing does not qualify 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: PEDRO A RAMIREZ P 07/31/2007