

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P95000058466

Entity Name: EXPISA, INC.

**FILED**  
**Dec 17, 2008**  
**Secretary of State**

## **Current Principal Place of Business:**

5805 BLUE LAGOON DR.  
#300  
MIAMI, FL 33126 US

## **New Principal Place of Business:**

## **Current Mailing Address:**

5805 BLUE LAGOON DR.  
#300  
MIAMI, FL 33126 US

## **New Mailing Address:**

FEI Number: 65-0599692

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARRONE, ALFONSO G  
15406 SW 8 LN  
MIAMI, FL 33194 US

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

VIGO, LADISLAO  
5805 BLUE LAGOON DR  
#300  
MIAMI, FL 33126 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: LADISLAO VIGO

12/17/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MARRONE, ALFONSO G  
Address: 15406 SW 8 LN  
City-St-Zip: MIAMI, FL 33194

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: STORNO, ANTONIO  
Address: 5805 BLUE LAGOON DR SUITE #300  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Change (X) Addition  
Name: PIRELA, DIXON  
Address: 5805 BLUE LAGOON DR SUITE #300  
City-St-Zip: MIAMI, FL 33126

Title: D ( ) Change (X) Addition  
Name: MARRONE, CLAUDIO  
Address: 5805 BLUE LAGOON DR SUITE #300  
City-St-Zip: MIAMI, FL 33126

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: ANTONIO STORNO

P

12/17/2008

Electronic Signature of Signing Officer or Director

Date