

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000035893

FILED
Jan 27, 2009
Secretary of State

Entity Name: VIA RIO, INC.

Current Principal Place of Business:

223 N. ROYAL POINCIANA BLVD
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

8873 B FONTAINEBLEAU BLVD
206
MIAMI, FL 33172

Current Mailing Address:

6328 NW 97 AVE
DORAL, FL 33178

New Mailing Address:

8873 B FONTAINEBLEAU BLVD
206
MIAMI, FL 33172

FEI Number: 65-0866597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEGOVIA, OVIDIO
223 N. ROYAL POINCIANA BLVD
MIAMI SPRINGS, FL 33166 US

Name and Address of New Registered Agent:

SEGOVIA, OVIDIO
8873 B FONTAINEBLEAU BLVD
206
MIAMI, FL 33172 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: OVIDIO SEGOVIA

01/27/2009

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: PD () Delete
Name: SEGOVIA, OVIDIO
Address: 223 N. ROYAL POINCIANA BLVD
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VSD (X) Delete
Name: BERRIO, PATRICIA E
Address: 223 N. ROYAL POINCIANA BLVD
City-St-Zip: MIAMI SPRINGS, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: SEGOVIA, OVIDIO
Address: 8873 B FONTAINEBLEAU BLVD APT 206
City-St-Zip: MIAMI, FL 33172

Title: () Change () Addition
Name:
Address:
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: OVIDIO SEGOVIA

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01/27/2009

Electronic Signature of Signing Officer or Director

Date