2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000066224

Entity Name: FC WORLD, INC.

FILED Dec 20, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 11018 NW 43 TERR
 4764 NW 97 PLACE

 MIAMI, FL 33178
 DORAL, FL 33178

Current Mailing Address: New Mailing Address:

11018 NW 43 TERR 4764 NW 97 PLACE MIAMI, FL 33178 DORAL, FL 33178

FEI Number: 65-0852523 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:

 SHOMAR, JOSEPH
 OLIVEIRA, ROBSON

 17439 NW 66 COURT
 4764 NW 97 PLACE

 MIAMI, FL 33015 US
 DORAL, FL 33178 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: OLIVEIRA ROBSON 12/20/2005

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:

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

Title: PD () Delete Title: () Change () Addition

 Name:
 BASTOS SOUZA, ADRIANO
 Name:

 Address:
 VICENTE BATALHA, 367, APT 601
 Address:

 City-St-Zip:
 COSTA AZUL SALVADOR, BRAZIL,
 City-St-Zip:

Title: VSTD () Delete Title: VSTD (X) Change () Addition
Name: JOSE DE OLIVEIRA, ROBSON
Name: JOSE DE OLIVEIRA, ROBSON

 Address:
 7200 NW 19 ST, STE 303
 Address:
 4764 NW 97 PLACE

 City-St-Zip:
 MIAMI, FL 33126
 City-St-Zip:
 DORAL, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: OLIVEIRA ROBSON VP 12/20/2005