

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000004959

FILED
Dec 20, 2007
Secretary of State

Entity Name: INTERNATIONAL PROJECTS GROUP, INC.

Current Principal Place of Business:

10464 NW 5 TERR.
MIAMI, FL 33172

New Principal Place of Business:

8912 SW 142 AV.
413
MIAMI, FL 33186

Current Mailing Address:

10464 NW 5 TERR
MIAMI, FL 33172

New Mailing Address:

8912 SW 142 AV
413
MIAMI, FL 33186

FEI Number: 65-0888147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FABRE, CLAUDE A
10464 NW 5 TERR.
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

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: CLAUDE A. FABRE

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: PSD () Delete
Name: RODRIGUEZ RAMIREZ, MANUEL E
Address: 10464 NW 5 TERR
City-St-Zip: MIAMI, FL 33172

Title: VTD () Delete
Name: FABRE, CLAUDE
Address: 10464 NW 5 TERR
City-St-Zip: MIAMI, FL 33172

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: RODRIGUEZ RAMIREZ, MANUEL E
Address: 8912 SW 142 AV. #413
City-St-Zip: MIAMI, FL 33186

Title: VD (X) Change () Addition
Name: RODRIGUEZ YEARA, MANUEL
Address: 8912 SW 142 AV. #413
City-St-Zip: MIAMI, FL 33186

Title: D () Change (X) Addition
Name: RODRIGUEZ YEARA, YASSER
Address: 8920 SW 142 AV. #722
City-St-Zip: MIAMI, FL 33186

Title: SD () Change (X) Addition
Name: FABRE, CLAUDE A
Address: 10464 NW 5 TER
City-St-Zip: MIAMI, FL 33172

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: CLAUDE A. FABRE

SD

12/20/2007

Electronic Signature of Signing Officer or Director

Date