

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000015074

FILED
Nov 11, 2005
Secretary of State

Entity Name: SOIN INTERNATIONAL CORP.

Current Principal Place of Business:

1333 S MIAMI AVE
STE 206
MIAMI, FL 33129

New Principal Place of Business:

% SMITH, ORTIZ, GOMEZ & BUZZI, PA
130 MINORCA AVE
CORAL GABLES, FL 33134

Current Mailing Address:

17125 N BAY RD
SUITE 3503
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

800 PARKVIEW DRIVE
SUITE 116
HALLANDALE BEACH, FL 33009

FEI Number: 65-0901039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALVARO CASTILLO B., P.A.
1390 BRICKELL AVENUE
SUITE 200
MIAMI, FL 33131 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: TOMAS MONTERROSO

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: ESQUIVEL, MAURICIO
Address: 11442 NW 69TH TERRACE
City-St-Zip: MIAMI, FL 33178

Title: S () Delete
Name: MONTERROSO, TOMAS
Address: 17125 N BAY RD #3503
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MONTERROSO, TOMAS
Address: 800 PARKVIEW DRIVE, STE #116
City-St-Zip: HALLANDALE BEACH, FL 33009

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: TOMAS MONTERROSO

SEC

11/11/2005

Electronic Signature of Signing Officer or Director

Date