

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000078732

Entity Name: PONMAS CORPORATION

FILED
Feb 12, 2008
Secretary of State

Current Principal Place of Business:

800 DOUGLAS RD.
NORTH TOWER-SUITE 900
CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 141898
CORAL GABLES, FL 33114 US

New Principal Place of Business:

806 S. DOUGLAS ROAD
SOUTH TOWER-9TH FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0967257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAS CANOSA, RAMON E
800 DOUGLAS ROAD, STE 900
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

MAS CANOSA, RAMON E
806 S. DOUGLAS ROAD 9TH. FLOOR
DOUGLAS ENTRANCE-SOUTH TOWER
CORAL GABLES, FL 33134 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: RAMON E. MAS CANOSA

02/12/2008

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: PONCE, JUAN E
Address: 821 SOROLLA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: ST () Delete
Name: MAS CANOSA, RAMON E
Address: 6350 SW 114TH ST
City-St-Zip: PINECREST, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PONCE, JUAN E
Address: 6844 N.W. 113TH PLACE
City-St-Zip: MIAMI, FL 33178

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: RAMON E. MAS CANOSA

ST

02/12/2008

Electronic Signature of Signing Officer or Director

Date