PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

02 NOV 21 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000006423

1. Corporation Name

Colombian Emeralds International, Inc.

REINSTATEMENT 02

2. Principal Office Address	**3.** Mailing Office Address
1201 N.W. 65th Place	1201 N.W. 65th Place
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ft. Lauderdale, FL	City & State: Ft. Lauderdale, FL
Zip: 33309 Country: USA	Zip: 33309 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 12/05/1997

5. FEI Number: 920148737 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X] $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: R. Christopher Cooper

Street Address (P.O. Box Number is Not Acceptable): 1201 N.W. 65th Place

600005147585
11/21/02--01046--001 **758.75

Suite, Apt. #, Etc.:

City: Ft. Lauderdale | State: FL | Zip Code: 33309

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: R. Cooper — Date: 11/20/2002

REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PDC	Stephen Crane	c/o International Bazaar	P.O. Box F-40349 Freeport, Bahamas
T	R. Christopher Cooper	1201 N.W. 65th Place	Ft. Lauderdale, FL 33309
S	Lynn Turnquest	c/o Masco-Chancery House - P.O. Box F-42544	Freeport, Bahamas

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: R. Cooper — R. Christopher Cooper — 11/20/2002 — 954-971-9393

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JP 11/25